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ABSTRACT

This curriculum is designed for parents and adolescents participating together in a program for parents who wish to be the primary sexuality educators of their children. The curriculum consists of units on: (1) exploring and understanding one's own sexuality; (2) adolescent sexuality; (3) sexuality in the home; (4) values; and (5) communication skills. Each unit contains a variety of activities appropriate for families with different ethnic origins, different political and religious viewpoints, and children of different ages. Each unit also contains goals and objectives; an overview of the activities; descriptions of the various activities; homework activities; and supplements such as magazine articles and answer sheets to be used in the session. (JD)

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February 1982

Final Report

TEACHING PARENTS TO BE THE PRIMARY SEXUALITY EDUCATORS OF THEIR CHILDREN

Volume IV

Curriculum Guide to Courses for Parents and Adolescents Together

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ACKNOWLEDGMENTS

The major goal of this project was to develop a model curriculum that anyone could use who wished to offer a program for parents anywhere in the United States. We designed a curriculum for parents (Volume III: Curriculum Guide to Courses for Parents). The present volume is adapted from Volume III for use with parents who take a course with their adolescent children.

For these two curricula we designed some activities ourselves, adapted activities from other curricula which were already available and from a number of colleagues who had designed and implemented activities for their own use. Some activities are so widely used, we do not know their source.

The following people and organizations provided materials or ideas: Education Development Center, CHOICE, Parent-Child Sex Education: A Training Module, Margaret Fjelstad, Debra Haffner, James Maddock, Planned Parenthood of Monterey, Planned Parenthood of Rochester and Monroe County, Planned Parenthood of Santa Cruz, Planned Parenthood of Seattle/King County, Planned Parenthood of Wisconsin, Parent Effectiveness Training (Gordon), and Values in Sexuality (Morrison and Price).

Several people reviewed the curriculum, commented on it, and suggested ways to improve it. Special recognition should be given to Sol Gordon for providing ideas and critiques at all stages of this project. We also thank our consultants: Margaret Fjelstad, Gregory Putzka, Jane Quinn, Martha Roper, and Mary Wegmann.

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INTRODUCTION

Parents in the United States believe they should be the primary sex educators of their own children. In their effort to become more effective in that role, many parents are now attending meetings, reading books and other materials, discussing the topic with professionals and other parents, and taking courses, usually with other parents but sometimes together with their children.

In this study funded by the Centers for Disease Control, we identified programs for parents all over the country, learned from them what parents want and need to know to become effective sexuality educators, and reviewed the abundant resources now available. Finally, we developed model curricula -- one for use with parents only (Volume III) and this one for parents taking a course with their adolescent children. Experienced sex educators implemented Volume III with a wide range of parent groups and offered suggestions. This curriculum for parents and adolescents together was implemented with two groups in Sacramento.

This volume, our revised edition of the model curriculum for parents, is designed to be used by educators with a wide range of teaching styles with families from a wide range of socioeconomic, educational, and religious backgrounds.

Approaches to Parent Education

The programs we reviewed reflected three different philosophies. The "traditional" sex education course focuses on teaching facts about physiology, anatomy, reproduction, contraception, and adolescent sexual behavior. Educators using this approach reason that many parents did not receive adequate sex education. They lack sexual information and, therefore, are unable to provide children with the necessary information and may be embarrassed by questions that draw attention to their inadequacies. Adolescents may not discuss sexuality with their parents because they do not see them as experts or because they are embarrassed to show their parents what they do not know.

Recently, sex educators have recognized that even when parents are well informed about physiology and anatomy, their attempts to convey sexual information may be ineffective because they do not understand their child's level of development. Such educators have expanded the traditional approach to include information about children's cognitive, moral, and psychosexual development. Providing information about stages of adolescence both prepares parents for what to expect and helps adolescents understand that many of their struggles are normal aspects of development.

A second approach to enhancing family communication about sexuality helps parents explore their own attitudes and values about sexuality and how those attitudes and values developed; it helps adolescents understand their parents' attitudes about sexuality. Educators using this approach reason that when parents are confused or feel guilty about their own sexual thoughts and behavior, they cannot adequately teach the necessary information or convey healthy attitudes to their children. It also assumes that many adolescents do not have an appreciation

for the difficulty of their parents' role, their relative inexperience, and their lack of role models. Many adolescents are unaware of experiences they may have in common with their parents. Therefore, a parent/adolescent sex education course should help parents and their children explore and share their feelings and attitudes about sexuality and their experiences with sexuality education.

A third approach helps families build communication skills. Educators using this approach believe that the problem of parents not teaching their children about sexuality is only part of a broader problem of parents and children having difficulty discussing any personal topics, particularly when parents and children seem to hold different values. This basic communication problem is compounded by the sensitivity of the topic of sexuality. Educators who use this third approach teach parents and adolescents skills and provide opportunities to practice listening, expressing feelings, and initiating conversations.

From our observation of the programs we reviewed, and from the needs assessments parents and parent sex educators completed, we concluded that each of the three approaches acknowledged an important need. Therefore, we attempted to integrate all three into one course: families' need to become more knowledgeable both about sexuality and about normal development, their need to become clearer about their own attitudes and values, and their need to develop and strengthen their ability to communicate with one another.

To integrate the approaches, we have focused on communication skills throughout the course, while keeping the subject of sexuality -- whether attitudes or information -- uppermost. If we present information about stages of adolescence, for example, we ask the facilitator to help parents consider how such knowledge might influence the way they choose to handle a sexuality-related situation at home. When parents and their adolescent children are learning specific ways to listen or are addressing their choice of sexuality words, they are at the same time becoming more clear about their own values and attitudes toward sexual issues. Both parents and their adolescent children have opportunities, beginning in the first session, to address their own issues, concerns, and confusions about sexuality, to consider how those arose, and to reexamine them with new information and different points of view.

Clearly, a short course cannot supply all the facts families will ever need in the process of growing up together. Therefore, the curriculum helps parents and adolescents develop skills and identify avenues for getting information themselves.

Organization of the Curriculum

This curriculum consists of four 2-hour units and one 4-hour unit on the following topics:

- Exploring and understanding our own sexuality (2 hours);
- Adolescent sexuality (2 hours);
- Sexuality in the home (2 hours);
- Values (2 hours); and
- Communication skills (4 hours).

Each unit contains a variety of activities appropriate for families with different ethnic origins, different political viewpoints, and different aged

children. However, the entire curriculum is intended for courses that parents and their adolescents attend together.

Twelve hours is more time than is usually devoted to courses enhancing communication about sexuality. Therefore, we designed this curriculum so that a teacher who is offering a shorter course or a different sequence of topics can still find useful activities and instructions. Teachers may rearrange or combine topics. While we prefer the progression provided here, some educators find alternatives more effective. For example, if the course focuses on teaching structured communication skills, it is useful to present them early rather than at the end of the course.

Each unit contains goals and objectives; an overview of the activities in the unit; descriptions of the various activities; homework activities; and supplements such as magazine articles and answer sheets to be used in the session.

Overview of contents. The overview is intended to assist teachers in developing lesson plans. It lists the topics and activities, the approximate time necessary for each activity, the type of activity (presentation, exercise or film), the materials needed, and whether the exercise is most appropriate with puberty-aged or older adolescents.

Goals and objectives. Each unit begins with a broad statement of purpose, its rationale, and behavioral objectives. The initial goal descriptions can guide the facilitator in setting up the broad outlines of a particular course.

Descriptions of activities. For each behavioral objective there is at least one corresponding learning activity. We describe in detail: its specific purpose, the materials needed, the approximate time for every activity, suggestions for conducting the activity, and points for discussion.

The activities include a range of teaching-learning techniques -- structured exercises, discussions, presentations and films. For some activities we recommend working in pairs; for others, in larger groups. In other activities we recommend that parents and adolescents work in separate groups; for others, in groups of parents with children other than their own. These instructions are not rigid. We hope teachers will modify exercises and adapt the presentations to meet their own style as well as participants' needs. Some teachers, for example, may prefer to substitute open discussion where we have designated an exercise, presentation, or film.

Supplements. Each activity mentions which handouts or worksheets will be used for that activity. Because teachers will need to copy the handout for distribution to participants, the handouts are in a separate "supplement" section.

Homework. Some activities, in our opinion, are best done at home. Some of these homework assignments ask parents and their adolescent children to help practice together skills learned in class. Many of the in-class exercises can also be adapted for homework, and thus expand coverage of the course.

Appendices. Appendix A contains an annotated list of educational films. Appendix B lists professional resources for teachers -- training opportunities and books for professional growth. Appendix C lists publishers and film distributors.

Selecting the Style of the Course

In planning your course, decide what content and process to include according to the expressed needs and style of the participants.

Passive vs. active: Choose sets of activities and employ teaching techniques which fit the group's learning style. Some groups are more reserved than others. If a teacher asks a group of reserved parents to participate in an activity which requires them to move around the room or lead discussions, they may feel threatened, embarrassed, and/or resistant. We found that parents are initially more inhibited when their children are present. Their discomfort will inhibit learning. Conversely, others find the inactivity of formal presentations and general discussions boring and want more challenging activities and interaction. This is particularly true of parent/adolescent groups who have previously worked together.

Conservative vs. liberal: When selecting course topics and types of activities, be sensitive to the families' values. Groups vary, even within the same community, in their tolerance for exploring different topics. For example, abortion may be a topic that some parents feel should not be discussed, particularly with their children present. Introducing such a topic early in the course, if at all, may be disastrous. A teacher should be sensitive to the orientation of the group.

The conservative vs. liberal criterion also applies to types of activities. Some participants object to role-playing and values-exploration exercises. Try to gauge such sensitivities in your own situation and to respect them in the way you design and implement your program.

Basic vs. complex knowledge: Different families have different needs for information. Some people prefer straightforward, basic information on anatomy and physiology. Others may prefer a more conceptually challenging presentation. You should ascertain early in the course what level of information presentation is best suited for a particular group. Do not provide instruction on material that is beyond the adolescents' comprehension, no matter how appealing it is to the parents.

The curriculum is designed with these criteria in mind. However, each teacher using this curriculum may need to adapt some of the exercises or develop new ones, depending on the needs of the group and his/her own style.

Implementing the Curriculum

This curriculum is designed so that it can be adapted to meet the needs of particular groups and particular situations. It can be used as a basis for teaching programs of varying lengths.

Regardless of the amount of time that you have, make an outline of your major goals and objectives. Then select activities which fulfill your objectives. To facilitate this process the identifying numbers of the corresponding activities are listed beside each objective. Although the units are presented in a specific order, they can be easily rearranged. If you prefer to follow a different sequence, however, make sure your sequence is logical. For example, participants need exposure to communication skills in order to understand the dynamics of problem

solving. It would not be appropriate to teach problem solving first. We recommend that you not skip over Unit I, as it is essential preparation for the rest of the curriculum. Participants usually need this initial time to be introduced to the broad topic of sexuality and to begin to become more comfortable discussing the issues.

Be sure to plan enough time for a meaningful introduction and overview of the program at the beginning of the course. Especially if you don't know the participants well, and if they don't know each other well, it is important to begin to develop a relationship with them and to establish a trusting, nonjudgmental atmosphere.

Select activities which you and the group will be comfortable doing.

Introduce only as much information as can be adequately discussed.

Pay close attention to the estimated amount of time to complete each learning activity. At the end of each session, provide closure for the session and incentive to return. We recommend ending a session on either a thought-provoking or a positive note.

After you organize a session, look it over. Make sure that each activity has an appropriate introduction, that it flows into the next, and that each session ends with a summary of the major points covered. If you want more help with how to introduce a session or an activity, or how to move smoothly from one into the next, turn back to the rationale on the first page of the unit.

Before each class session, review the specific learning objective(s) that you have chosen and the corresponding learning activity(ies). If you have chosen more than one activity, carefully consider how appropriate they are in combination and in what order to use them. You might want to select alternative activities in case a particular activity is not working or takes less time than you planned.

When you cannot discern how participants are feeling about a particular topic or exercise, pass out index cards and ask them for feedback. Review the index cards before proceeding.

At the end of the course, plan ample time for a summary and closure. Provide information about resources, referrals, and other opportunities.

Course Atmosphere

The atmosphere of the course should be as relaxed and open as possible. The following points, if made repeatedly throughout the course, will help set this tone:

Parents do not need to know all the facts; children may be more informed about some topics than their parents are. Looking up answers in a book not only provides parents and children with the requested information, but also teaches both to use books as a resource. Parents may also become comfortable learning with and from their children.

Parents and children do not need to feel completely comfortable with sexual questions or discussions. They might feel reassured to know that anyone can be embarrassed by a question or topic. As family members become more open to discussions about sex, they may find themselves disconcerted at first. However, with time and practice, both parents and children will become accustomed to discussing sexuality with each other.

Generally, parents do not need to worry about giving too much basic information. There is no empirical evidence that parent/child discussions about sexuality in general lead to harm. Harm is more likely through nonverbal communication or parents' inappropriate behavior. However, parents need to use discretion in choosing issues to discuss with their children. For example, disclosing intimate details about their sexual relationship is usually inappropriate.

Parents should not wait for their children to ask questions. Some adolescents are too shy to ask; others feel they have the answers even though their information is incorrect.

Parents are not totally responsible for their children's behavior. If the child does something the parents consider inappropriate, it is not necessarily the result of the relationship with their parents. By the same token, parents cannot expect their children to think and behave exactly as they want them to. Adolescents need to recognize their responsibility for their own behavior.

Parents and children need to understand that contradictions in their own values are normal. For example, parents may accept behavior such as premarital sexual activity for others, but find it unacceptable for their own children. It is important for parents to share such ambivalence with their adolescents. Adolescents may recognize their parents as sexual people, but feel extremely uncomfortable discussing it. Adolescents can help their parents discuss sexuality if they share such feelings.

Teaching Techniques

Many educators rely heavily on formal presentations as a teaching technique, although there are many other vehicles for teaching about adult and adolescent sexuality and family sex education. You may want to experiment with a few new techniques in order to expand your teaching repertoire. We particularly recommend the following teaching techniques: large group discussions, small group discussions, films, role playing, and structured activities. Some activities provide more opportunity for participants to discuss attitudes and beliefs than do others. In our experience, participants are more enthusiastic if they can explore issues through a variety of classroom formats.

Discussion. Through discussion, participants can share facts and ideas. They can also become more clear about their own feelings and values and those of their peers and the other generation. Discussion can be facilitated in large or small groups. For large groups -- no more than 25 -- the teacher can choose a few stimulating questions to spark discussion. In small group discussions, more people have an opportunity to participate. Those who are shy are more likely to speak up when there are fewer people to listen and fewer people to compete with. Groups can also generate ideas and creatively explore issues or attempt to solve problems.

To begin the discussion, present a problem or question to the class. Ask the group to think of all possible answers to the question or solutions to the problem. Don't censor their suggestions; welcome all ideas. Then evaluate the ideas together to identify the most realistic or useful ones.

Discussions are particularly valuable for parent/adolescent courses. They give participants an opportunity to practice discussing sexuality with each other, to express their own views, and to listen to the views of the other generation.

Films. Films can provide factual information and demonstrate parent/child relations in an entertaining manner. Some films, by providing the opportunity to discuss hypothetical situations, trigger stimulating conversations without the need for major conflict over real situations. If the course is offered in 3-hour or longer segments, films can also provide a good break in routine.

In preparing to show films, carefully preview the ones that interest you, and then select those that are most appropriate for your group. Remember that adolescents are in the audience. Pay attention not only to the film's content but also to its setting (suburban or inner city), the type of language used, the quality of acting, the style of clothing, and the racial composition of the cast. A film which features extremely articulate, White urban families might be poorly received by rural, working-class families. Films that are clearly outdated or have poor acting will be more of a distraction and frustration than a learning tool.

When selecting a film, ask yourself the following questions:

1) What are the objectives of the session? Does the film help accomplish them?

2) Is the film consistent with the values of families and the hosting organization?

3) Does the film contain accurate current information?

4) Does the film contain current information, language, style of dress, and behavior?

5) Are the characters and situations sufficiently realistic for this group to identify with?

Keep in mind that there are no perfect films. A film which is entertaining, relevant to your objectives, and a good stimulant to discussion may be useful even if it has a few minor flaws.

Role playing. In role playing, participants assume the role of another person and perform this role in front of others. The goals of role playing are to allow opportunities: 1) to experience the feelings of other people and thus become more empathic, and 2) to try out new behaviors such as strategies for communicating effectively.

Some people strongly object to role playing. If you choose role playing, use it cautiously, keeping in mind the considerations we describe above. Only volunteers should be recruited. Many people find it easier to participate in role playing in small groups. Using small groups also gives more participants a chance to play a role.

Structured activities. Other types of experiential activities -- values votings, attitude rankings, analyses of advantages and disadvantages, case studies, stories, and dilemmas -- encourage participants in small groups to become more clear about their own attitudes and feelings, to share these ideas with peers, and to consider how attitudes and feelings affect behavior. We have included many examples of such activities in the curriculum.

Select a structured activity because it will achieve the goals and objectives of the session, not just because the group will have fun doing it. Give clear instructions before the activity begins. The discussion during and after an activity is most important because it clarifies what might be learned as a result of the activity.

Some of these activities call for reading and/or writing. If participants in the class have poor reading and writing skills, adapt the activities. For example, you can read the material aloud and ask participants to answer verbally or to vote thumbs-up or thumbs-down in response to your questions.

Evaluation of Learning and Teaching

To learn what correct and incorrect information participants already have, and to provide some direction for the goals of the course, we recommend administering a brief knowledge test at the beginning of the course. The test should reflect material you are prepared to cover in the course. If you share the results of the test with the class, they will undoubtedly realize that they have a great deal to learn on a wide range of topics. To measure the amount of correct information participants have learned in the course, administer the same knowledge test, or relevant parts of it, at the end of the course.

Evaluation questionnaires to assess how much participants' knowledge, attitudes, and skills have changed during a course, and how effective they considered the course to be are all provided in Volume II, Guide to Designing and Implementing Multisession Courses. They can give valuable feedback to teachers about specific ways to improve the course.

Characteristics of Effective Teachers

Both group members and the teacher are uncomfortable when the teacher has had inadequate training. If you have had little training in human sexuality or if your information is no longer current, we encourage you to seek additional training. A parent sexuality educator:

- Should be well informed about sexual topics;
- Should spend a significant amount of time exploring her/his own attitudes about a variety of sexual issues;

- Should have strong communication and group facilitation skills, and should be comfortable using a variety of teaching techniques in the classroom;

- Should have training or experience working with parents and adolescents;

- Should be familiar with the needs and sensitivities of parents with children puberty-aged to late adolescence;

- Should be able to facilitate a course based on values of the participants, rather than on her/his own values;

- Should respect parents' potential to be effective sexuality educators;

- Should have experience with adolescent children (as parent, older sibling, aunt/uncle, teacher, etc.); and

- Should be familiar with the wealth of resources potentially available to parents.

Further Use of This Report

In this introduction we have highlighted important features of using the curriculum: we have described our rationale and how we have organized the curriculum; we have recommended important considerations for selecting the style of the course; and we have offered practical suggestions for implementing it. These recommendations are expanded in Volume II: Guide to Designing and Implementing Multisession Courses. In addition, that volume integrates our practical suggestions for:

- Developing community support,
- Selecting a sponsor,
- Choosing and training teachers,
- Recruiting participants,
- Maintaining attendance,
- Evaluating the impact of the course,
- Addressing the participants' special needs based on the ages of their children or ethnic background, and
- Planning alternatives when multisession courses are not feasible.

Volume II, then, is a companion user's guide to this curriculum.

To learn of and possibly contact others who have offered courses to help parents in their role as sexuality educators of their children, see Volume V of this report, the National Catalog of Programs-1981. It describes 90 programs from all over the country and provides the names of contact people.

Unit I

EXPLORING AND UNDERSTANDING OUR OWN SEXUALITY

OVERALL GOAL:

To introduce participants to the course and to establish a group atmosphere in which they can be comfortable learning about sexuality. To help parents and their children understand some of their own sexual attitudes and recall their own education about sexuality. To help both parents and adolescents discover that they can in fact discuss sexuality together.

RATIONALE:

In this country we are bombarded with sexual references nearly everywhere we turn, yet carry an unwritten code that talking about sexuality is impolite. Many people feel awkward, embarrassed, or upset talking about sexuality with anyone, whether with other family members or with other participants in a course.

This unit helps participants begin 1) to gain comfort talking about sexuality with others, 2) to discover their own assumptions, 3) to reexamine them, and 4) to hear and consider different points of view. Most importantly, this introductory period establishes an expectation that we can best learn from one another by respecting others' viewpoints, no matter how different from our own they may be.

BEHAVIORAL OBJECTIVES:

1. To discuss the goals and expectations for this course. (Activities I.1, 2, 3, and 8)

2. To establish trust and rapport among participants. (Activities I.1 - 6)

3. To define sexuality broadly. (Activity I.7)

4. To remember and discuss how participants learned about sexuality. (Activities I.9 - 12)

5. To explore participants' attitudes and feelings about sexuality. (Activities I.4, 6, and 9 - 12)

UNIT I OVERVIEW

Name of Activity	Estimated Minutes	Type of Activity	Materials Required	Age of Children	Page No.
1 Introduction to Course	10	Presentation	Course Outline	11-18	13
2 Interview	15-20	Exercise	Newsprint, Supplements 1&2	11-18	15
3 Expectations	15-20	Exercise	Paper	11-18	16
4 Similarities vs. Differences	20	Exercise	None	11-18	17
5 Find Someone Who	20-30	Exercise	Supplement 3	11-18	18
6 ID Cards	20-30	Exercise	3x5 Cards	11-18	19
7 Sex vs. Sexuality	15	Exercise	Blackboard or Newsprint	11-18	20
8 Framework for Communication in Sexuality	10-15	Presentation	Newsprint	15-18	21
9 My Parents Told Me	20-30	Exercise	Supplements 4&5	15-18	23
10 Puberty	20	Exercise	3x5 Cards	11-15	24
11 Discussion Questions	20-40	Discussion	None	11-18	25
12 Homework: Lifetime Influences	25	Exercise	Handout	15-18	26

INTRODUCTION TO COURSE (I.1)

Purpose:

To introduce yourself as a teacher or facilitator. To introduce the course format and the ground rules.

Time: 10 minutes

Materials: Copies of your course outline

Planning Note:

These instructions are meant to highlight the important elements of beginning a course. Educators with a great deal of experience will not need the level of detail presented here.

Procedure:

Leader

1. Set the tone for the session, e.g., give a personal anecdote about your own sex education.

2. Give a brief description of who you are (your background in human sexuality training) and why you are teaching parents and adolescents.

3. Allow participants to ask questions about you. If they have difficulty starting, give them an example or two. This demonstrates your accessibility.

Program

1. Explain the general purpose and goals of the course:

   - To help parents and their children obtain the knowledge and skills necessary to communicate effectively about sexuality.

   - To assist parents and their children in exploring and articulating attitudes and values about sexuality.

2. Distribute an outline of course contents. This outline could include the purpose and goals of the course in general, topics to be covered, starting and ending times, breaks, and inclusion of any outside resource persons. This is highly recommended. An outline provides participants with information about what to expect and what not to expect and gives the message that the course is organized and thorough.

3. If you are going to evaluate the program, explain the purpose and process in detail. Ask for participants' questions.

4. Emphasize the importance of each individual's participation in all sessions. Some teachers have encouraged taping a session for any absent participants. Continuity is extremely important for the success of a course.

5. If appropriate, discuss your availability for conferences before and after class. Some people take courses with specific problems in mind. They may need your support or an outside referral.

6. If there are two facilitators, divide participants into two groups, one with parents, one with children. Give the groups an opportunity to discuss their expectations, questions, and concerns. Make clear that the course is neither specifically for parents nor specifically for children, but rather for both.

Program "Rules"

1. Make a group decision about smoking. Because children are participating, problems can be avoided by establishing a no-smoking rule.

2. Express the benefits of full participation by everyone, but give permission for individuals not to share or to participate in an activity.

3. Encourage group members to share class time so that everyone will have an opportunity to participate in discussions. Point out that it is the group's responsibility to avoid domination by one participant or family.

4. Establish that there will be no spectators. Participants will gain more from the course if there is an atmosphere of cohesiveness and trust.

5. Explain the need for confidentiality.

6. Establish individuals' responsibility for what they talk about. Encourage families to discuss at home what is appropriate to disclose about themselves and family experiences.

7. Establish any other rules you or the group deem necessary.

Transition

Summarize the program for this session. Explain the flow from discussion to exercise to discussion.

INTERVIEW (I.2)

Purpose:

Warmup activity to give participants the opportunity to develop a relationship with at least two people in the program, to learn more about each other, and to express expectations for the course.

Materials:

Newsprint, magic markers, "Parent Interview" and "Teenager Interview" (Supplements 1 and 2).

Time: 15-20 minutes

Procedure:

Distribute Supplements 1 and 2. Have participants form groups of three strangers. Keep parents and adolescents separate. If participants already know one another, encourage them to pick partners other than their spouses and close friends.

Participant one interviews participant two who interviews participant three who interviews participant one. Tell participants they can "pass" on any question. Ask the groups to write their answers to the "expectations" questions (6 and 7) on newsprint and tape them on the wall. Give participants a few minutes to chat and to read the other groups' expectations.

Discussion Points:

1. Identify the similarities in group expectations.

2. Identify the topics you won't be able to cover.

3. Encourage participants to share their experience with family members who are not taking the class.

EXPECTATIONS (I.3)

Purpose:

Warmup activity to give participants an opportunity to develop a relationship with one other person in the program, to learn more about each other, and to express expectations for the course, anonymously, to the facilitator.

Materials: Paper and pencils for each participant

Time: 15-20 minutes

Planning Note:

This activity is especially useful as an orientation session or as one of the first activities in the first session. If you have two facilitators, separate parents and teenagers.

Procedure:

Slowly read the following questions, allowing time for participants to quickly jot down responses. Mention that the papers will be collected after the exercise. Suggest that the responses be anonymous.

a) How did you hear about this course?

b) For adolescents: How does your mother, father, or sibling feel about your taking this course?

c) For adults: How does your son, daughter, or partner feel about your taking this course?

d) How are you feeling now that you're here?

e) What are two things you hope to get out of this course?

f) What would be the worst thing that could happen to you in this course?

Have participants find a partner to talk about the questions. After a few minutes, bring the group together and invite them to share comments. Collect the unsigned papers and keep them until the end of the program.

Discussion Points:

1. Explain that discomfort in talking about sexuality is common in our society.

2. Point out that there are some things the course cannot accomplish. Because this is an educational course of short duration, it cannot substitute for therapy or solve personal or family problems.

SIMILARITIES VS. DIFFERENCES (I.4)

Purpose:

Warmup activity to help participants get acquainted and discover similarities and differences within the group. To build enthusiasm for discussing personal attitudes and issues related to sexuality.

Materials: None

Time: 20 minutes

Procedure:

Explain that you would like to begin the session with an exercise that will explore similarities and differences in the group. Tell the group that you will give them two choices. They should go to one side of the room if they select the first choice and to the opposite side if they select the second choice. For each question, instruct them to spend a few minutes discussing how their feelings are similar to the others in their group. Then ask representatives from each group to explain why they made their choices. Remind participants that no choice is "right" or "wrong." Alternatively, establish a continuum which will show differences and similarities; have participants explain why they are at a particular point on the continuum.

Would you rather be
- a man?
- a woman?

Would you rather be
- under 21?
- over 21?

Would you rather have
- a few special friends?
- many different friends and acquaintances?

Would you rather be
- a late bloomer?
- an early bloomer?

Would you rather
- read a book?
- watch television?

Would you rather be
- very intelligent?
- very popular?

Would you prefer
- many discussions with family members about sex?
- few discussions with family members about sex?

Discussion Points:

1. How did you feel during this exercise?

2. Did you feel any pressure to go to the place where you thought most others would go?

3. What did you do about it?

4. Did you learn anything about your fellow group members?

FIND SOMEONE WHO (I.5)

Purpose:

To help participants get acquainted. To help the facilitator and participants identify how comfortable participants are sharing information about themselves.

Materials: "Find Someone Who" (Supplement 3)

Time: 20-30 minutes

Procedure:

Give Supplement 2 and pencils to participants. Ask them to move around the group, to find someone to autograph their sheet who, for example, "has a younger brother." This process should continue until each person has found someone to autograph all of the questions.

Then bring the group together and pose a few questions for a group response: "How many of you have a younger brother? Raise your hand." This identifies similarities and gives closure to the exercise. Acknowledge that asking strangers questions related to sexuality can be awkward.

Discussion Points:

1. How many different signatures did you obtain?
2. Were there any questions that were hard to ask?
3. Which items did you skip? What made you skip them?
4. Were you unable to obtain signatures for any items?
5. How many people were able to sign number 5: "Learned a lot of sexual information from parents"?
6. How many people could answer the knowledge questions?

ID CARDS (I.6)

Purpose:

Warmup activity to help participants meet each other and become more comfortable discussing sexual issues.

Materials: 3x5 cards, pencils, pins

Time: 20-30 minutes

Procedure:

Distribute 3x5 index cards. Instruct participants to make name tags which answer each of the following questions (these instructions can be altered depending on the group):

Center:	Name you want to be called
Top left corner:	Age you'd like to be
Top right corner:	Favorite hero or heroine
Bottom left corner:	The person or group of people who influenced you the most about sexuality
Bottom right corner:	Two things you really like about yourself

Ask participants to mill around and spend 1 or 2 minutes with each person sharing the information on their name tags. Reconvene the large group.

Discussion Points:

1. How did you feel answering those questions?
2. What were you uncomfortable answering?
3. What were you comfortable answering?
4. How did you feel seeing others' name tags?
5. How was talking to an adolescent different from talking to a parent?

SEX VS. SEXUALITY (I.7)

Purpose:

To help participants begin talking about sex. To define the words sex and sexuality and to encourage participants to incorporate a broad definition of sexuality.

Materials: Blackboard and chalk or large newsprint and magic markers

Time: 15 minutes

Procedure:

Write sex and sexuality on the blackboard or newsprint. Suggest that a logical place to begin the session is to take a good look at just what all of us are thinking about when we use the words sex and sexuality. Ask participants to call out any thoughts that seem to fit for sex, then for sexuality. Provide additional thoughts, if necessary, when lists are completed. Watch for the word love. If it does not appear by the end of the exercise, discuss this.

Discussion Points:

1. Discuss the importance of feelings about being a boy or girl or a man or woman.

2. Many people think of intercourse and reproduction when they hear the word sex. Sexuality is actually not restricted to genital adult sexual activity, but an integral component of the entire personality.

3. Offer a broad definition of sexuality which includes gender role, social role, feelings, and relationships. For example: "Human sexuality is a function of the total personality which begins at birth and ends at death. It includes genital or reproductive processes. It also includes 1) how one feels about him/herself as a person; 2) how one feels about being a woman or a man; 3) how one relates to members of the same sex and the opposite sex." This broad definition of sexuality and relationships will be the basis of the course.

4. Point out that what falls under these two words is given to us by our culture, by our religion, and by our family and friends. We can create our own meanings for these words, but need to be aware of the meanings they have for others around us including our children and our parents.

FRAMEWORK FOR COMMUNICATION IN SEXUALITY (I.8)

Purpose:

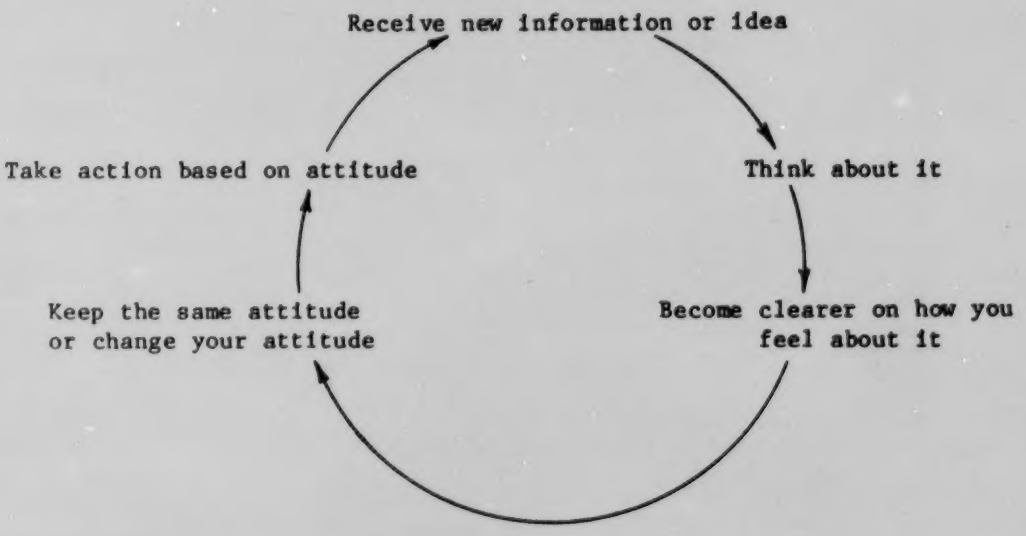
To alert participants to the need to remain open to new information and to different points of view.

Materials: Newsprint and magic markers

Time: 10-15 minutes

Procedure:

Draw the diagram shown below in large letters on the newsprint. (Source: E.G. Morrison and M.U. Price, Values in Sexuality. See Appendix B.) Present the following information to the group: This is a framework that we will follow for the next __ weeks (or __ hours). You will be exposed to much new information and ideas from me and other participants during this program. Often when we hear something that we think we disagree with, we stop listening -- a red flag goes up. I am asking you to listen to and consider all information that you are exposed to. Think about it carefully and then decide to what degree you accept or reject it.


Receive new information or idea
Think about it
Become clearer on how you feel about it
Keep the same attitude or change your attitude
Take action based on attitude

Example: Parents overhear their 16-year-old daughter telling a friend she is considering becoming sexually active.

	Parents	Daughter
Assumptions	She doesn't want to discuss it with us. She can't know what she's doing; she could get hurt or pregnant.	If they knew, they'd try to stop me; they wouldn't understand.
New information/ ideas	Talk to school counselor and church leader. Learn that children who have opportunity to talk with parents make more responsible, informed decisions.	Friend agrees it's confusing but doesn't have answer to my questions. Could use some information, adult perspective.
Think about it	Remember how responsibly she has handled school and part-time job. Remember how uncomfortable we have all been in previous discussions.	Remember parents have respected other decisions -- tried to let me lead my own life.
Become clearer		
Keep or change attitude	Decide to try to convey openness to discussing topic.	Decide to ask parents their views.

Discussion Points:

1. Ask the participants if they have any questions about this framework.

2. Emphasize that this course will focus on presenting new information, setting aside time to think about this information, and arranging activities that will help participants become clearer about their attitudes toward various sexual activities. As a result, parents and adolescents will be able to communicate more effectively about sexuality.

Transition:

The next step is to start exploring our own attitudes toward sexuality. In general, there are three ways we pick up attitudes about sex: 1) through information and media sources such as movies, books, and magazines; 2) through attitudes toward sexuality expressed consciously and unconsciously by important people in our lives, especially parents; 3) through observing the ways the important adults in our lives act when married, in love, "on the make," etc.

MY PARENTS TOLD ME (I.9)

Purpose:

To help parents and adolescents think about what they learned from their parents.

Materials:

"My Parents Told Me" (Supplement 4 for parents), "My Parents Tell Me" (Supplement 5 for adolescents).

Time: 20 minutes

Procedure:

Divide parents and adolescents into two groups. Have parents fill out "My Parents Told Me" and adolescents fill out "My Parents Tell Me." Participants should work independently. After they have completed the questionnaire, ask them to discuss the similarities and dissimilarities between their parents' attitudes and their own. After 10-15 minutes, bring the groups together to discuss the differences between generations. Keep the discussion at an exploratory level; steer away from addressing or trying to resolve a particular family's conflict.

As an alternative, distribute the Supplements as an exercise to do at home.

Discussion Points:

1. How many items did you leave blank? Why?

2. How are your attitudes similar to your parents' attitudes? How are they different?

3. What do you want to tell your children (or children to be) about each of these topics?

PUBERTY (I.10)

Purpose:

To help parents remember their own adolescence. To increase their awareness of adolescents' need to discuss sexual issues with family and friends. To help adolescents identify some of their current struggles and share them with parents.

Materials: Pencils and 3x5 cards for everyone

Time: 20 minutes

Procedure:

Divide parents and children into two groups, either homogeneous groups or groups with parents and children from different families together. Give each participant two 3x5 cards. If your group is relatively balanced with several males and several females, have them indicate their sex by putting either "M" or "F" at the top of the cards. Then have participants write on one card:

"The easiest thing for me to adjust to in puberty was (is) ...."

Have them write on the other card:

"The hardest thing for me to adjust to in puberty was (is) ...."

Collect the cards and divide into males' and females' responses. Read the responses to the group for comments and reactions.

Discussion Points:

1. For parents: What memories did this exercise generate in you? How do you feel about your own adolescence?
2. Do you think puberty is any easier or harder for adolescents today? How or why?
3. What would have helped you through the rough spots in puberty? What can you do to help your sons and daughters?
4. For adolescents: How does your experience compare with that of your parents?
5. What can your parents do to be helpful?

DISCUSSION QUESTIONS (I.11)

Purpose:

To help participants understand how they learned about sexuality and how their values compare with current attitudes about sexuality in our society.

Materials: None

Time: 20-40 minutes

Procedure:

Pose some of the questions listed below. Add any questions that may be particularly relevant to your group. Try to help participants discuss their own feelings, experiences, and values. However, be careful that the discussion does not become too revealing and threatening.

If there are two facilitators, divide participants into two groups -- parents in one, adolescents in the other. Add questions 8 and 9.

Discussion Points:

1. Where did you receive your sex education? What was it like?
2. How many of you discussed (discuss) sex with your parents or parent? What happened? How did you feel?
3. Who else taught (teaches) you about sex?
4. What questions and worries did (do) you have as an adolescent? Who answered them for you?
5. Were you prepared for the physical changes of growing up? How did you feel when those changes began to occur?
6. What are the different sexual values conveyed in the media?
7. How would you describe the current sexual atmosphere in this country? Is sex too free? Exploited?

For separate groups only:

8. What personality characteristics would you like to see different in your parents or children?
9. How would you want your parents or children to behave differently about discussions of sexuality?

HOMEWORK: LIFETIME INFLUENCES (I.12)

It can be helpful to understand where we get our values and attitudes. Have each member of your family complete the list.

Listed below are some people and experiences that might have influenced your ideas and values about sex. Place an "x" next to those people and experiences that have had no influence or that do not apply. Then rank the remaining items with "1" indicating the greatest influence, "2" the next most important influence, and so on.

_____	your father	_____	a teacher
_____	your mother	_____	your boy/girlfriend
_____	your step parent	_____	educational reading (e.g., text book)
_____	your grandparent(s)	_____	entertaining reading
_____	your brother(s)/sister(s)	_____	movies
_____	your aunt or uncle	_____	TV
_____	your religion	_____	records
_____	your teenage friend(s)	_____	an experience
_____	your adult friend(s)	_____	other (explain)

1. Explain how these influences might affect your values today: _____

_____

2. How do you feel about these values? _____

_____

3. Do you want to reevaluate any of these values and possibly change some of them?

_____

(Adapted from Abbey-Harris, N. and K.R. Todd, Saying Goodbye to the Birds and the Bees.)

Supplement 1

PARENT INTERVIEW

1. How many children do you have?

2. What sex and age are your children?

3. Who else, if anyone, helps you raise your children?

4. Who told you about this course?

5. Why did you decide to participate?

6. What in particular do you hope to learn during this course?

7. What changes, if any, do you hope this course will produce in your life?

Supplement 2

TEENAGER INTERVIEW

1. How many brothers and sisters do you have?

2. What sex and age are they?

3. Who else, if anyone, helps raise you?

4. Who told you about this course?

5. Why did you decide to participate?

6. What in particular do you hope to learn during this course?

7. What changes, if any, do you hope this course will produce in your life?

Supplement 3

FIND SOMEONE WHO

Find someone who:

1. Has a younger brother _____
2. Has been asked an embarrassing question about sex _____
3. Was or is uncomfortable taking showers after gym class _____
4. Would rather be home tonight _____
5. Learned a lot of sexual information from parents _____
6. Knows the time during the menstrual cycle when a woman is most likely to get pregnant _____
7. Has been turned down for a date _____
8. Knows the symptoms of a sexually transmitted disease _____
9. Is a member of a single-parent family _____
10. Developed earlier than most friends _____
11. Knows someone who is homosexual _____
12. Feels nervous doing this exercise _____
13. Has a mother who works or worked _____
14. Wishes he or she were younger _____
15. Wishes he or she were older _____

Supplement 4

MY PARENTS TOLD ME

Parents communicate their values to children in a variety of ways. Below are eight major issues and under each are sentences to complete. In some areas, the messages might have been implied, rather than explicitly stated. Complete each sentence and then circle (A) if you now agree with the message or (D) if you disagree with it.

EXAMPLE:

MONEY

Mom always said "Have fun with your money." A D

Dad always said "Save your money for a rainy day." A D

FRIENDSHIP

Mom always said _____ A D

Dad always said _____ A D

LOVE

Mom always said _____ A D

Dad always said _____ A D

DATING

Mom always said _____ A D

Dad always said _____ A D

MARRIAGE

Mom always said _____ A D

Dad always said _____ A D

SEX

Mom always said _____ A D

Dad always said _____ A D

MASTURBATION

Mom always said _____ A D

Dad always said _____ A D

HOMOSEXUAL PEOPLE

Mom always said _____ A D

Dad always said _____ A D

BEING A MAN/BEING A WOMAN

Mom always said _____ A D

Dad always said _____ A D

ME

Mom always told me I was _____ A D

Dad always told me I was _____ A D

Supplement 5

MY PARENTS TELL ME

Parents communicate their values to children in a variety of ways. Below are eight major issues and under each are sentences to complete. In some areas, the messages might have been implied, rather than explicitly stated. Complete the sentence and then circle (A) if you now agree with the message or (D) if you disagree with it.

EXAMPLE:

MONEY

Mom always said "Have fun with your money." A D

Dad always said "Save your money for a rainy day." A D

FRIENDSHIP

Mom always said _____ A D

Dad always said _____ A D

LOVE

Mom always said _____ A D

Dad always said _____ A D

DATING/GOING OUT WITH SOMEONE OF THE OPPOSITE SEX

Mom always said boys/girls were _____ A D

Dad always said boys/girls were _____ A D

MARRIAGE

Mom always said _____ A D

Dad always said _____ A D

SEX

Mom always said _____ A D

Dad always said _____ A D

MASTURBATION

Mom always said _____ A D

Dad always said _____ A D

HOMOSEXUAL PEOPLE

Mom always said _____ A D

Dad always said _____ A D

BEING A MAN/BEING A WOMAN

Mom always said _____ A D

Dad always said _____ A D

ME

Mom always told me I was _____ A D

Dad always told me I was _____ A D

Unit II

ADOLESCENT SEXUALITY

OVERALL GOAL:

To provide information about the physical and psychosexual development of adolescence. To provide the important facts on various topics in human sexuality.

RATIONALE:

Adults often forget what it was like when they were young. Other adults think that young people face the same situation they faced as children. Adolescents themselves are confused about what is happening to them. Adolescents often lack correct information but are uncomfortable asking questions. Some parents do not discuss sex with their children because they do not feel they possess enough information. Other parents, also with insufficient information, discuss sex with their children, but provide them with incorrect information.

The first half of this unit helps participants learn about the broad range of normal adolescent development. The second half concentrates on providing information where it is missing, incomplete, or inaccurate.

BEHAVIORAL OBJECTIVES:

1. To discuss the psychosexual and psychosocial development of adolescents. (Activities II.1, 2, 4, 7, and 8)

2. To discuss the physical changes of puberty. (Activities II.2, 5, 6, 7, 8, and 9)

3. To obtain correct answers to questions on sexual topics which currently face participants' families. (Activities II.5 - 9)

4. To discuss the prevalence of adolescent sexual behavior and pregnancy and strategies for preventing unwanted pregnancies. (Activity II.3)

UNIT II OVERVIEW

Name of Activity	Estimated Minutes	Type of Activity	Materials Required	Age of Children
1 Sexual Development Through Childhood	20-30	Presentation	Supplement 1, Newsprint	15-18
2 Adolescent Development	15-25	Presentation	Newsprint	12-18
3 Adolescent Pregnancy and Prevention	40-60	Film or Presentation	Projector	15-18
4 Film: Child Development	40	Film	Projector	15-18
5 Using Resources: Sexual Information	30-60	Exercise	Supplement 2 or 3, Textbooks	13-18
6 Sexual Facts Review	30	Exercise	Supplement 4	13-18
7 Anonymous Questions	30-60	Exercise	3x5 Cards	11-18
8 Film: Facts and Feelings about Sexuality	30-45	Film	Projector	11-15
9 Balloon Race	40	Exercise	Balloons with Questions	11-15

SEXUAL DEVELOPMENT THROUGH CHILDHOOD (II.1)

Purpose:

To provide information on the physical, emotional and social development of children.

Materials:

"Normal Sexual Development" (Supplement 1), newsprint, and magic marker.

Time: 20-30 minutes

Procedure: Draw a long line on the newsprint.

Infant _____ Adult

Ask participants to think about how a human being gets from infancy to adulthood. What does it take to become a normal, healthy, sexually functioning adult, that is, someone who is capable both of enjoying a mature sexual relationship and of making responsible decisions about sexual behavior? List the major tasks:

- Must possess a basic identity as a male or female.
- Must learn how to act like a male or female, however one's culture defines these behaviors.
- Must develop a sexual attraction to the opposite sex.
- Must develop a willingness to share oneself with another person in a loving intimate relationship.
- Must acquire some basic information about how to give and receive sexual pleasure and how to conceive and not to conceive.

Acknowledge that not everyone agrees with these five points. For example, some people see homosexuality as healthy adult sexuality. Some feel celibate people are capable of having a sexually fulfilling life.

Next, ask for suggestions from the participants: how does a child, adolescent, or adult accomplish these tasks? If necessary, supplement their answers with the following:

- By responding to inner urges for genital pleasure (leads to sexual responsiveness).
- By exploring and experimenting with other children, teenagers, and eventually adults.

- By watching carefully how adults behave.

- By observing the media.

Distribute the handout and discuss the major landmarks in children's sexual development.

Discussion Points:

1. Encourage questions. If appropriate, pass around several books that either parents or children might use to learn more about sexual development.

2. Reinforce the concept that even without special training, most children do manage to grow up into mature, sexually healthy adults. Nevertheless, a parent who is tuned in to children's development can make the whole process easier for both parent and child.

ADOLESCENT DEVELOPMENT (II.2)

Purpose: To present theories about the developmental stages of adolescence.

Materials: Newsprint and magic marker

Time: 15-25 minutes

Procedure:

Explain to participants that adolescence is probably one of the most difficult stages for both parents and children. Ask the group: "What issues do you think your children are grappling with as they begin the transition from childhood to adulthood?" Review the following information:

Developmental Tasks of Adolescence

Independence: Adolescents need to become less dependent on parents. They shift from parents to peers or to belief systems in order to achieve independence. This shift is strong and may involve rebellion. The child may demonstrate ambivalence, that is, s/he may act like a dependent child one day and demand to be treated like an adult the next.

Identity: Adolescents struggle to define themselves and what they want to accomplish. They are answering the questions: "Who am I? What can I be?" This process involves experimenting. Adolescents need to develop sex role identity, a positive body image, and a sense of esteem and competence.

Intimacy: This is a time of preparation for loving relationships. Adolescents are learning to express and manage emotions. They are developing the capacity to love and be loved, and to be intimate in relationships with others.

Integrity: Adolescents must develop a foundation for sorting out values. Parents have provided a base for this. However, there is a tremendous amount of other input at this time, such as peers, media, and school. Adolescents are deciding what to believe in and how to behave.

Intellect: The adolescent's intellectual capacity is increasing and changing from concrete thinking to include abstract thinking. Many adolescents become capable of conceptual thinking and of understanding logic and deductive reasoning. This increased ability may heighten self-esteem. Some adolescents tend to overvalue their intellectual theories and see things from an idealistic point of view.

Discussion Points:

1. For adolescents: Do you recognize any of these issues in your life now?
2. For parents: Do you think your child has begun to grapple with any of these issues?
3. How do you react to your child's new behavior?
4. How can adults help adolescents resolve these tasks successfully?

ADOLESCENT PREGNANCY AND PREVENTION (II.3)

Purpose:

To give participants information about adolescent sexual behavior and pregnancy and strategies for pregnancy prevention.

Materials:

Screen, 16mm film projector or filmstrip projector:
"Teenage Pregnancy and Prevention" [Sunburst Communications]
"Woman/Child" [National Foundation/March of Dimes]

Time: 40-60 minutes

Procedure:

Explain that adolescence is a time when young people become more aware of sexual feelings and romantic attractions. More adolescents are choosing to have sexual intercourse than they did 20 years ago. This audiovisual presentation is designed to give group members information about adolescent sexual behavior, the number of adolescent pregnancies, and strategies for prevention. Show the film or filmstrip.

Alternative Procedure:

To alert participants to the prevalence of teenage sexual activity and pregnancy, administer the following brief quiz. Read each question and ask participants to record their answers. (Sources: Alan Guttmacher Institute, 1981, and Zabin, 1981. See Appendix B. Statistics may fluctuate with time.)

1. What percentage of 15-17-year-old girls have had intercourse?

   a. 25% (b.) 33% c. 50% d. 66%

2. What percentage of 15-17-year-old boys have had intercourse?

   a. 25% b. 33% (c.) 50% d. 66%

3. What percentage of teenage girls became pregnant before they became 20?

   a. 1% b. 6% c. 24% (d.) 36%

4. In 1978, how many American adolescents became pregnant?

   a. 5,000 b. 51,000 c. 550,000 (d.) 1.1 million

5. What percentage of sexually active adolescent females don't get birth control because they are afraid their parents will find out?

   a. 5% b. 11% c. 21% (d.) 31%

6. Of those who get pregnant, what percentage choose abortion?

a. 10% b. 15% c. 23% (d.) 38%

7. Of those who get pregnant, what percentage have out of wedlock births?

a. 5% b. 12% (c.) 22% d. 42%

8. Of those who decide to have their babies, what percentage keep them?

a. 10% b. 26% c. 76% (d.) 96%

Go over the answers to the quiz. Present the following information to participants.

Sexual Revolution?

Are today's teenagers much different from teenagers of 20-30 years ago? Certainly attitudes are different today. Adolescents were expected to be chaste then. Now, sexual activity seems to be more acceptable to the youth peer group and society in general. All teenagers were not virgins then; about half are sexually active now.

More adolescents are getting pregnant now. Why?

- Girls and boys are maturing sexually at an earlier age. They are able to conceive earlier, in part because more girls are beginning to menstruate at younger ages.
- There are more adolescents who are capable of getting pregnant in the United States (due to the population explosion of the 1950s).
- More teenagers are having intercourse at an earlier age.
- General health is better.

The media bombards us with sexual messages. Magazines, television and books continually present information and attitudes about sexuality. Some are constructive messages; most are confusing or misleading, such as telling youth that "everybody is having sex." (Source: Lewis, H. & Lewis, M., 1980. See Appendix B.)

Sexual Behavior

- Of the 21 million adolescents in the United States between 15-19, approximately 11 million are sexually active.

- Slightly less than half of 15-19-year-olds are not having sex.

- More adolescent girls are having intercourse. For girls aged 15-19 in metropolitan areas, the figures jumped from 30 percent in 1971 to 50 percent in 1979.

- Black teenagers begin sexual activity earlier and have higher pregnancy rates than White teenagers. However, these rates are not continuing to increase as they are with Whites.

- Teenagers are beginning intercourse younger. In 1979, only 34% of sexually active teenagers always used birth control; 39% sometimes used birth control and 27% never used birth control. (Source: Zelnick and Kantner, 1980. See Appendix B.)

Teenagers have intercourse infrequently with few partners:

- In studies (Zelnick and Kantner, 1976), 38% of girls reported that they had had no intercourse in the previous month. Some respondents had had intercourse only once or "a few times." Three out of five girls had had only one partner.

Most intercourse takes place in parents' home:

- Youth Values Project revealed that 61% of nonvirgin girls and 47% of boys had intercourse in their own homes. (Source: Ross, 1978. See Appendix B.)

Social indicators of teenagers who are likely to have intercourse:

- No college aspirations
- A serious relationship with a partner
- A single-parent household
- Alienation from parents
- Weak religious beliefs
  (Source: Lewis, H., & Lewis, M., 1980. See Appendix B.)

Adolescent Pregnancy

- Most are unintended: 2/3
- Many end in abortion: approximately 40%
- The risk of complications for younger teenagers are greater: higher rates of infant mortality, toxemia, anemia, prematurity, low-birth-weight babies.

Negative social consequences of adolescent parenting:

- Many interrupt education, have fewer career choices
- Tend to have lower incomes
- If partners marry, are at high risk for divorce
- Tend to have larger families on lower incomes
  (Source: Alan Guttmacher Institute, 1981. See Appendix B.)

Discussion Points:

1. Were you surprised by any of the facts presented in the film or lecture?

2. What do you think about the numbers of adolescents who are having sex, getting pregnant, or becoming parents?

3. What are your family values on this subject?

4. For parents: What would you do if you found out that your child was having intercourse, was pregnant, or had impregnated someone?

FILM: CHILD DEVELOPMENT (II.4)

Purpose: To reinforce information previously presented on child development.

Materials:

16mm projector and film: "Everybody Rides the Carousel", Part II.

Time: 40 minutes (24 minutes for film)

Planning Note:

This film presents abstract concepts. Be sure to preview it to measure its appropriateness for your group.

Procedure:

Before showing the film, present a brief overview of Erickson's theories about stages of psychosocial development. Show Part II which deals with late childhood, adolescence, and young adulthood. See film annotations in Appendix A.

Discussion Points:

1. Could parents identify with the parents in the film? If so, how?
2. Could adolescents identify with the youth in the film?
3. How can parents help their children successfully progress to adulthood?

USING RESOURCES: SEXUAL INFORMATION (II.5)

Purpose:

To provide information on sexual topics. To give participants experience using resource materials on human sexuality. To build peer support in the group.

Planning Note:

This exercise is best suited for groups with limited information about sexuality. Use a variety of textbooks geared to both low and high reading levels -- some college or professional texts, some written for adolescents. We recommend the following assortment (for more information, see Appendix B):

Aho, J., and Petras, J. Learning About Sex: A Guide for Children and Their Parents.
Carrera, M. Sex: The Facts, the Acts and Your Feelings.
Gordon, S. Facts About Sex for Today's Youth.
Johnson, E.W. Love and Sex in Plain Language.
Katchadourian, H. and D. Lunde. Fundamentals of Human Sexuality.
Kelly, G.F. Learning About Sex -- The Contemporary Guide for Young Adults.
McCary, J.L. Human Sexuality.

Materials:

Human sexuality textbooks (approximately 10 texts per class of 20), "Sexual Knowledge Questions" (Supplement 2) or "Sexual Knowledge Inventory" (Supplement 3).

Time: 30-60 minutes

Procedure:

Explain the transition: "Now that we have worked on the broad picture of sexual development, let's move on to some of the details of human sexuality. You do not need to be a walking encyclopedia to understand sexuality, but you do need to know how to find sexual information.

Divide participants into groups of three or four. You may want to encourage families to work together. Distribute the knowledge questionnaires and ask participants to find the answers to the questions as a group. Have texts available for those who want to use them. After 20 minutes, have them come back to the large group and review the answers to all of the questions. Encourage them to guess if they don't know. Ask them where they could get answers if they really needed to find something out. Allow time for participants' additional questions.

Answers to Supplement 3:

1. T	9. T	17. T	25. T
2. T	10. F	18. F	26. T
3. T	11. F	19. T	27. F
4. T	12. T	20. T	28. T
5. F	13. F	21. F	29. T
6. T	14. F	22. F	
7. F	15. F	23. T	
8. F	16. T	24. T	

Discussion Points:

1. Were you surprised by any of the answers? Which ones?

2. In which area do you feel you need more information?

SEXUAL FACTS: REVIEW (II.6)

Purpose: To answer questions.

Materials: "Sexual Facts Review" (Supplement 4)

Planning Note:

Use this activity only if there were a number of incorrect answers to your pretest questionnaire.

Time: 30 minutes

Procedure:

Distribute knowledge questionnaires. If they did not already complete them, allow time for this either in class or as a homework assignment. Read each question and have participants provide answers. Use this opportunity to correct myths and provide additional information.

Answers to Supplement 4:

1. e	6. b	11. d	16. d	21. d	26. b
2. a	7. a	12. d	17. a	22. c	27. d
3. a	8. a	13. d	18. e	23. e	
4. d	9. d	14. e	19. c	24. c	
5. c	10. c	15. d	20. d	25. b	

ANONYMOUS QUESTIONS (II.7)

Purpose:

To give participants an opportunity to ask questions about sexuality that they may not feel comfortable asking in a group.

Materials: Cardboard box with large slot on the top, 3x5 index cards, textbook

Time: 30-60 minutes

Procedure:

At the end of each session and at the beginning of this exercise, ask participants to write on a 3x5 card any questions they have about puberty, reproduction, developmental sex differences, masturbation, fantasy, contraception, abortion, homosexuality, and the probability of becoming pregnant. Open the box and read each question to the group. (You may want to prepare answers to the questions you obtained in earlier sessions.) Make sure every question is answered accurately. If there is some confusion or if you are unsure of an answer, look up answers together in a text book.

Alternative Procedure:

Type questions on index cards. Have participants divide into groups. Give each group a few questions and ask them to answer as many as they can. Reconvene the entire class and ask a spokesperson from each group to report on their questions. If time is limited, ask them to present the most difficult question.

Discussion Points:

1. What type of question is most difficult to answer?

2. What topics would you want to continue to research?

FILM: FACTS AND FEELINGS ABOUT SEXUALITY (II.8)

Purpose:

To alert participants to common myths and to provide facts on puberty, reproduction, probability of pregnancy, and normal body variations.

Materials:

16mm projector, room with curtains, screen or blank wall, film:
"Am I Normal?" [New Day Films],
"Dear Diary" [New Day Films], or
"Then One Year" [Churchill].

Time: 30-45 minutes

Procedure:

See Appendix A for a description of each film.

Show the film and ask for comments and questions. Ask participants if they need clarification of any of the facts presented in the film.

Discussion Points:

1. Did you learn anything new?
2. Could you relate to the characters in the film?
3. Did the parents seem realistic (in the films "Am I Normal?" and "Dear Diary")?
4. How might parents have handled those situations?

BALLOON RACE (II.9)

Purpose:

To review factual information about sexuality; to provide a physical activity as a break in the workshop format.

Materials: Balloons and slips of paper with questions on them

Time: 40 minutes

Procedure:

Stuff slips of paper (with questions) into the balloons. Use the sample questions below or develop questions that are appropriate for your group. Prepare enough for each participant to be able to answer two questions. Form two teams and have them go to opposite sides of the room. In a relay-type race, participants of each team, one at a time, blow up a balloon, pop it, and read and answer the question out loud. The question must be answered correctly before the next team member can begin to blow up his/her balloon. The facilitator or other team members can give clues if an individual is having difficulty answering a particular question. The team that finishes first wins.

Allow time for discussion of questions after the race. Warn others who may be working nearby that you are going to be leading a rather noisy activity. If your group seems particularly reserved, this activity may not be appropriate.

Balloon race sample questions:

a. What is circumcision?

b. True or false: A boy's voice starts to change at about 13 or 14 years of age.

c. What is the name for a woman's monthly blood flow?

d. What is the name of the male hormone?

e. What is the name of the female hormone?

f. Where are sperm made?

g. Is it OK to bathe or shower while having a menstrual period?

h. Which part of the female genitalia is most sensitive?

i. Is it normal for a woman to have a vaginal discharge?

j. True or false: Girls and boys may have a sexually transmitted disease without having any symptoms.

k. What causes homosexuality?

l. True or false: Using foam and condoms together is almost as effective in preventing conception as using the pill.

m. Is any method of birth control 100% effective?

n. When do boys begin puberty?

o. At what age is a girl capable of getting pregnant?

Other questions may be added to this list.

Source: J.G. Brown, M. Downs, L. Peterson, and C. Simpson, Parent-Child Sex Education: A Training Module. St. Joseph, MO: Child Experience, Inc., 1978.

Supplement 1

NORMAL SEXUAL DEVELOPMENT IN CHILDREN: MAJOR LANDMARKS

A. Birth through 2 Years of Age

1. Family encourages either a male or female identity.
2. Child begins to explore genitals and other body parts unless stopped by parents or other adults.
3. Family and other significant adults convey attitudes toward body parts (in particular, genitals).
4. Child experiences awareness of genital pleasure. (From birth, boys experience erections and girls lubricate vaginally.)
5. Family either builds or discourages the development of trust.
6. Family either builds or discourages the development of self-esteem in the child.
7. Child is completely dependent upon parents/caretakers.

B. 3 and 4 Years of Age

1. Family continues to reinforce a male or female identity.
2. Child becomes aware of gender differences.
3. Child touches genitals for pleasure unless taught not to.
4. Child may participate in mutual body exploration with children of both sexes.
5. Child begins to develop attitudes toward same and opposite sex.
6. Child may wish for special relationship with opposite sex parent and compete with parent of same sex.
7. Child becomes more independent - sees him/herself as a separate person.

C. 5 through 7 Years of Age

1. Child's gender identity is fixed.
2. Child usually gives up wish for special relationship with opposite sex parent and seeks a stronger relationship with same sex parent.
3. Child continues to participate in mutual body exploration.
4. Child may begin to daydream or fantasize about sex.
5. Child may have confused, even hostile, feelings towards children of the opposite sex.

D. 8 through 12 Years of Age

1. Peer group has increased influence on child's self-image.
2. Child begins to separate from parents.
3. Child begins to experience body changes during puberty.
4. Some girls begin to menstruate.
5. Child may feel modest.
6. Child may masturbate, sometimes to orgasm.
7. Child hides sex play from parents.

E. 13 Years of Age and On

1. Child continues to experience body changes (puberty). On the average boys develop about 2 years later than girls.
2. Most girls menstruate by age 16.
3. Most boys are capable of an ejaculation by 15.
4. Child seeks greater independence, often rebelling against parents.
5. Child probably masturbates.
6. Child probably experiences sexual fantasies.
7. Child may have a sexual attraction or experience with someone of the same sex. This is not necessarily an indication of a same-sex orientation.
8. Child is attracted to the opposite sex or aware of the lack of attraction.
9. Child experiences frequent mood swings.
10. Child becomes more aware of physical appearance, sometimes being vain and at other times very self-critical.
11. Child tends to be greatly influenced by peer groups.
12. Child begins to develop romantic relationships.

Supplement 2

SEXUAL KNOWLEDGE QUESTIONS

1. What changes does a boy go through during puberty?

2. What changes does a girl go through during puberty?

3. At what age do boys mature physically? At what age do girls?

4. How many eggs are released from the ovaries each month?

5. How many sperm are released during each ejaculation?

6. When is a woman capable of reproducing?

7. Check the situations where a woman <u>can</u> become pregnant:

   ____ a. If she has sexual intercourse 2 weeks before menstruating.

   ____ b. The first time she has sexual intercourse.

   ____ c. If she has sexual intercourse during her menstrual period.

   ____ d. If she has sexual intercourse standing up.

   ____ e. If she doesn't have sexual intercourse but the male climaxes next to the opening of her vagina.

8. Who masturbates in our society?

9. What are the effects of masturbation?

10. What are the theories about how people become homosexuals?

11. How does drinking alcohol affect sexual response?

12. How does marijuana affect sexual response?

13. Who has sexual fantasies?

14. List three types of sexually transmitted diseases (STD). Why do teenagers sometimes avoid medical care for STD?

15. What influences the behavioral differences between boys and girls?

16. What does research suggest about how knowledge about sexuality influences adolescent sexual behavior?

17. Describe:

a. abstinence

b. condom

c. diaphragm

d. foam

e. intra-uterine device (IUD)

f. natural family planning

g. pill

h. withdrawal

18. How effective is each method?

a. abstinence

b. condom

c. diaphragm

d. foam

e. intra-uterine device (IUD)

f. natural family planning

g. pill

h. withdrawal

Supplement 3

SEXUAL KNOWLEDGE INVENTORY

TRUE	FALSE		
___	___	1.	When a boy goes through puberty, many body changes occur.
___	___	2.	The sexual double standard means that it is OK for males to have sexual experiences but it is less OK for females.
___	___	3.	Symptoms of VD or sexually transmitted diseases show up more often in women than in men.
___	___	4.	People who boast about sexual exploits usually do so because they are sexually insecure and worried about their sexuality.
___	___	5.	The pill is not effective and is a dangerous method of birth control for most women.
___	___	6.	When teenagers enter puberty, they become much more interested in sexuality.
___	___	7.	You can always tell a homosexual by the way s/he walks and talks.
___	___	8.	A woman cannot get pregnant the first time she has intercourse.
___	___	9.	The condom is a major contraceptive method for which the male can take responsibility.
___	___	10.	Two eggs are released from a mature woman's ovaries every month; several hundred sperm are released every time a male ejaculates.
___	___	11.	Children who receive accurate sexual information are more likely to be sexually active.
___	___	12.	Girls start maturing physically at different ages, but usually catch up with each other in a few years.
___	___	13.	The roles men and women play are determined primarily by biological factors.
___	___	14.	The rhythm method of birth control is extremely safe and an excellent method of birth control for teenagers.
___	___	15.	Homosexuality is caused by the parents.
___	___	16.	Most males and females have masturbated at some point in their lives.
___	___	17.	The diaphragm is a safe and effective method of birth control when used properly.

TRUE FALSE

___ ___ 18. On the average, boys develop physically earlier than girls do.

___ ___ 19. Sexual fantasies are common for both men and women.

___ ___ 20. Much early sex play is motivated by curiosity.

___ ___ 21. Ninety percent of teenagers who are sexually active use no birth control.

___ ___ 22. By the age of 18, fewer than half of all teenagers have had intercourse.

___ ___ 23. Safe and reliable contraceptives can be obtained only from a doctor or health clinic.

___ ___ 24. Ovulation occurs approximately 14 days before the beginning of a woman's next period.

___ ___ 25. Most adolescent girls who have babies keep them rather than give them up for adoption.

___ ___ 26. About one third of all teenage girls become pregnant before they turn 20.

___ ___ 27. If an adolescent has a same-sex experience, he or she is probably homosexual.

___ ___ 28. There is no known cure for Herpes.

___ ___ 29. Abstinence is the most effective method of birth control.

Supplement 4

SEXUAL FACTS REVIEW

Directions. Complete each sentence by circling the letter of the one best phrase that makes each statement true. If all of the phrases make a statement true, circle the letter for "all of the above." If none of the phrases makes a statement true, circle the letter for "none of the above."

1. When an average boy goes through puberty (the physical change from childhood to adolescence):

   a. he loses his "baby fat" and becomes slimmer
   b. his penis becomes larger
   c. he produces sperm
   d. his voice becomes lower
   e. all of the above

2. It is normal for:

   a. one egg to be released from each ovary each month in mature women
   b. millions of eggs to be released from one ovary each month in mature women
   c. testes to produce one sperm for each ejaculation (climax) in mature men
   d. none of the above

3. Masturbation (self-stimulation) is something:

   a. many males and many females do
   b. only males do
   c. only females do
   d. only a few males and a few females do
   e. none of the above

4. The birth control pill:

   a. can be used by all women
   b. is a good contraceptive for women who smoke
   c. usually increases menstrual cramping
   d. must be taken for 21 consecutive days every month in order to be effective
   e. all of the above

5. If 6-year-old boys look at each others' genitals while playing doctor or taking a bath, they will:

   a. be bothered by the memory for the rest of their lives
   b. probably become homosexuals
   c. be pretty much the same as before
   d. be doing something not usually done by young boys

6. Children who receive accurate sexual information from their parents:

   a. are more likely to have sex with many partners than their uninformed friends
   b. are more likely to use birth control when they become sexually active than their uninformed friends
   c. behave sexually no differently than their uninformed friends

7. The sexual double standard means that:

   a. boys are encouraged to have sexual experiences while girls are punished for having them
   b. boys and girls are equally free to have sexual experiences
   c. boys and girls are equally punished for sexual experiences

8. Boys and girls become able to reproduce as a result of:

   a. hormonal changes in puberty
   b. increased sexual activity during adolescence
   c. emotional changes
   d. none of the above

9. A man may become temporarily impotent (be unable to get or maintain an erection) due to:

   a. overuse of drugs and alcohol
   b. physical fatigue
   c. depression
   d. all of the above
   e. none of the above

10. The diaphragm (a birth control device) should be used:

   a. without any cream or jelly
   b. with any type of lubricant
   c. with spermicidal jelly
   d. either with or without spermicidal jelly

11. Homosexuality is usually the result of:

   a. a passive father and a dominant mother
   b. a hormonal imbalance
   c. a genetic defect
   d. factors largely unknown

12. As they enter puberty, some teenagers become interested in sexual activities because:

   a. their sex hormones are changing
   b. the media push sex for teenagers
   c. some of their friends are having sex and expect them to also
   d. all of the above

13. Out of 100 girls between the ages of 15 and 19, how many become pregnant each year?

    a. 1
    b. 2
    c. 5
    d. 10

14. People who have sexual fantasies:

    a. are usually unhappy with their sex life
    b. act out most of their fantasies
    c. have sex with many different partners
    d. all of the above
    e. none of the above

15. To use condoms the right way, a person must:

    a. leave some space at the tip for the ejaculate (come)
    b. use one every time sexual intercourse occurs
    c. hold it on the penis while withdrawing from the vagina
    d. all of the above

16. If 100 couples have sexual intercourse regularly for 1 year without using any contraception, how many will become pregnant by the end of the year?

    a. 10
    b. 30
    c. 60
    d. 90

17. Physically:

    a. girls usually mature several years earlier than boys
    b. boys mature several years earlier than girls
    c. all boys and girls are fully mature by age 16
    d. all boys and girls are fully mature by age 18

18. A woman cannot become pregnant:

    a. the first time she has sexual intercourse
    b. a few days after sexual intercourse
    c. if she has sexual intercourse during her menstrual period
    d. if she has sexual intercourse standing up
    e. none of the above

19. Who can obtain abortions?

    a. only women over the age of 16
    b. only women over the age of 16 who have the permission of their parents
    c. most women, although the requirements vary from state to state

20. Research suggests that adolescents who learn about contraception are likely to:

a. begin having sex at the same time or later than their uninformed friends
b. use contraceptives more effectively when they do begin to have sex
c. remember a fair amount of what they learned
d. all of the above

21. When an average girl goes through puberty:

a. her breasts become developed
b. her hips become larger
c. she grows body hair under her arms
d. all of the above

22. People who learn new information about human sexuality are likely to:

a. have sex with many different partners
b. deny that they have sexual feelings
c. think more fully about their sexual attitudes and feelings
d. none of the above

23. The rhythm method of natural family planning (not having intercourse during fertile days of the month):

a. means couples cannot have intercourse anytime they want
b. requires the woman to keep a record of when she has her period
c. is effective less than 80% of the time
d. is recommended by the Catholic Church
e. all of the above

24. Physical feelings during intercourse are increased:

a. by drinking a lot of alcohol
b. by taking a lot of drugs
c. by being free of guilt and nervousness
d. none of the above

25. The boy most likely to brag about his sex life is the one who:

a. is very active sexually
b. is worried about his own masculinity
c. is comfortable with his appearance and sexual activity

26. The physical changes of puberty:

a. happen in a month or 2
b. happen to different children at different ages
c. happen quickly for boys and slowly for girls

27. Having an abortion:

a. produces feelings of guilt and sadness in some women
b. produces feelings of guilt and loss in some men
c. can have a profound effect on the couple
d. all of the above
e. none of the above

Unit III

SEXUALITY IN THE HOME

OVERALL GOAL:

To help participants explore sexuality issues within the family and methods of handling them.

RATIONALE:

Parents and adolescents often take a sexuality course because of current specific issues they are facing at home. By this time in the course, they will probably feel comfortable enough talking about the subject and sharing with others in the class to explore these concerns.

In many ways, adolescents develop physically and emotionally much as their parents did. But their experiences in today's society often seem drastically different. They are exposed to an overwhelming diversity of information and lifestyles. Adolescents can help their parents develop appreciation for their experience and the influences on their lives that they must cope with daily.

This unit provides a forum for families (1) to apply their sense of humor to and develop perspective about the challenges of growing up together in today's world; (2) to discuss their concerns and hear the range of ideas and approaches other participants suggest; and (3) to consider what children learn from various parental responses to their behavior.

BEHAVIORAL OBJECTIVES:

1. To discuss issues currently faced or anticipated at home. (Activities III.3 - 5, 6, 9, and 10)
2. To establish some basic principles to guide parent-child relationships. (Activity III.2)
3. To consider a variety of ways to handle situations at home. (Activities III.3 - 6)
4. To learn how children are affected by various responses to their behavior. (Activities III.3 - 7)
5. To review factual information. (Activity III.1)
6. To examine the cultural milieu of adolescents in the past and present. (Activity III.8)

UNIT III OVERVIEW

Name of Activity	Estimated Minutes	Type of Activity	Materials Required	Age of Children	Page No.
1 Fact/Feeling Spinner	20-35	Exercise	Paper Plates with Spinners	11-18	67
2 Bill of Rights	15-30	Discussion	Supplement 1	11-18	69
3 Issues at Home	30-45	Exercise	3x5 Cards	14-18	70
4 Film: Issues at Home	45-60	Film	Projector	12-18	72
5 Question and Answer	20-30	Discussion	None	11-18	73
6 Situations	30-45	Exercise	Supplements 2-6, Newsprint	12-18	74
7 Behavior Theory	30	Presentation	None	15-18	75
8 Adolescent's World	30-45	Exercise	Media Examples	11-18	77
9 Homework: Evaluating Feelings (Parents)	15	Exercise	Handout	11-18	79
10 Homework: Evaluating Feelings (Adolescents)	15	Exercise	Handout	13-18	80

FACT/FEELING SPINNER (III.1)

Purpose:

Warmup activity for participants to begin sharing their feelings about certain sexual issues and to review information related to sexuality.

Materials:

Paper plates divided like pies with four sections: two green sections labeled "Feeling," two yellow sections labeled "Fact," and a movable cardboard arrow (spinner) in the middle; "Feeling" questions typed on green 3x5 cards and "Fact" questions typed on yellow 3x5 cards.

Time: 20-35 minutes

Procedure:

Divide participants into small groups. Give each group a plate and a set of yellow and green question cards. Instruct participants to take turns spinning, drawing an appropriate question card, and responding to that question.

Sample Fact/Feeling Questions:

Green "Feeling" Cards

1. How do you feel about practicing self exams for breast or testicle cancer?
2. How do you feel about asking your doctor questions about sex?
3. With whom in your family do you feel most comfortable discussing sexuality?
4. The thing I like most about being a man/boy or woman/girl is ....
5. The thing I dislike most about being a man/boy or woman/girl is ....
6. The most difficult sexual topic to discuss with my mother/daughter or father/son is ....
7. If you could change something about your body, what would it be?

Yellow "Facts" Cards

1. Share a myth that you have heard about menstruation (periods).
2. How many sperm are in the average ejaculation?
3. To start a baby growing, how many sperm must fertilize the egg?
4. True or false: The egg is fertilized in the fallopian tube.

5. During childbirth, the baby leaves the mother through a passageway called the _____.

6. How often should a sanitary napkin be changed?

7. Is it normal to have a vaginal discharge?

8. What are some symptoms of pregnancy?

9. What are some signs of gonorrhea in males?

10. How big is a woman's egg?

11. What is a nocturnal emission?

12. What is the difference between "sex" and "sexuality"?

Source: J.G. Brown, M.M. Downs, L. Peterson, and C.A. Simpson. Parent-Child Sex Education: A Training Module, St. Joseph, MO: Parent-Child Experience, Inc., 1978.

BILL OF RIGHTS (III.2)

Purpose:

To introduce participants to values upon which the course is based. To identify basic rights of children and parents for family communication about sexuality.

Materials: "Bill of Rights" (Supplement 1)

Time: 15-30 minutes

Procedure:

Introduce this discussion by saying something like this:

"Many people feel that having some clear ideas about the child's rights and the parent's rights makes it easier to decide how to act and how to respond to situations like the ones we have experienced. I would like to describe to you one way of sorting out family rights. My goal is not to force you to agree with this material, but rather to give you something challenging to think about and discuss."

Pass out copies of "Bill of Rights" and review each item. Be sure participants understand each item. Try to assess how the group feels about these ideas. Explore any concerns that arise in the group. Some parents and adolescents intuitively agree. Other parents will experience some of the child's "rights" as a threat to some very deeply held convictions about the division of power in the family. Some adolescents will reject any intrusion into their social lives. Take extra time for these statements if you need it. Allow participants to add statements to the list if they can reach a consensus. Play devil's advocate and point out questions about the value statements they generate.

Discussion Points:

1. Are there some "rights" that are easier said than done?
2. Are there any "rights" that parents support but adolescents don't?
3. Are there any "rights" that adolescents support but parents don't?
4. Would you add anything to the list?

ISSUES AT HOME (III.3)

Purpose:

To discuss participants' concerns about their family interactions related to sexuality.

Materials: 3x5 cards

Time: 30-45 minutes

Procedure:

Introduce this session by saying something like this: "Let's explore what troubling situations you have already faced regarding your family and sexuality. Sometimes people feel a little embarrassed about things that have happened, so let's do this anonymously. Try to be as frank as you can."

Ask participants to think of the most difficult or interesting situation that has come up at home. Ask them to describe the situation on a 3x5 card and pass it in. If group members cannot think of a situation that has happened at home, have them write down an imaginary situation that they would be uncomfortable handling. Give the following examples to help people get started:

For adolescents:

- Your parent finds a birth control device in your room.
- Your parent doesn't listen to your views on sexuality.
- Your parent doesn't like your boy/girlfriend.
- You are nervous asking questions about sex.

For parents of adolescents:

- You find a pornographic magazine under your child's mattress.
- Your daughter asks you to take her to the birth control clinic.
- Your child does not honor the family curfew.
- You don't like the fast crowd that your child is hanging around with.
- Your child doesn't ask questions about sex.
- Your child asks questions to which you don't know the answer.

Explain that much of the remaining time will be spent exploring ways of handling these issues.

When they are finished, collect the cards and shuffle them. Divide parents and adolescents into separate small groups and redistribute the cards. Ask them to brainstorm different ways to handle the situations. Have one person in each group act as recorder. When groups are finished (10-15 minutes), have them come back to the large groups where the recorders report their discussions.

Discussion Points:

1. Was it difficult to think of a situation?

2. What feelings did you have writing about a home experience?

3. What alternatives did the group find for handling different situations?

4. What alternatives seem most appropriate for your family?

5. Reinforce, when appropriate, the similarity of situations as they are written down. If a particularly difficult situation is mentioned, offer support to the anonymous person for the stress he or she must be feeling about this.

FILM: ISSUES AT HOME (III.4)

Purpose:

To demonstrate that many parents feel awkward or uncertain when discussing sexual topics with their children. To allow participants to consider how they would handle situations based on their own value system.

Materials:

Projector, screen, extension cords, projectionist, film:
"A Family Talks About Sex" [Perennial Films] (for groups with young adolescents)
"Loving Parents" [Texture Films]
"Mother, May I?" [Shared Future Films] (for groups with adolescents aged 18 and older)

Time: 45-60 minutes

Procedure:

Introduce the film: "We have already made a list of situations that come up in our homes and we have talked about some general guidelines for responding to these situations. Let's watch a film to get some more ideas about handling questions and problems when they come up."

Indicate the length of the film and briefly describe the content. If you are using "A Family Talks About Sex," explain that the film portrays a family with a particular set of values with which the participants may or may not agree.

Discussion Points:

1. What are general reactions to the film?

2. Would participants have handled any of the situations differently than depicted in the film? If so, how?

3. If participants are too accepting of the solutions depicted in the film, play the devil's advocate. Help them see alternatives.

4. If "Mother, May I?" is shown, ask parents how they would continue the conversation with their children.

5. If the group is willing, have them role play these situations and any others that come up.

6. Focus on the issues relevant to the age of the group's children.

QUESTION AND ANSWER (III.5)

Purpose: To address concerns about handling sexual questions and behaviors.

Materials: None

Time: 20-30 minutes

Procedure:

Open the discussion by asking for participants' questions about dealing with sexuality at home. Try to respond to each question and then ask group members how they might have responded in similar situations.

Discussion Points:

1. Do parents and adolescents agree on answers to questions that arise?
2. Encourage adolescents to discuss situations with which they want assistance.
3. When an answer is suggested, ask participants to imagine the consequences.

SITUATIONS (III.6)

Purpose:

To help participants understand that children learn from attitudes and behaviors as well as from direct comments. To alert children to the dilemmas their parents experience.

Materials:

"Situations" (Supplements 2-6) or situations you develop in response to particular parent or adolescent concerns. Newsprint and magic markers.

Time: 30-45 minutes

Procedure:

Introduce the exercise. Separate parents and adolescents and ask them to form small groups. Give each group a different issue and every participant a situation worksheet. Ask them to discuss the impact of the various parent behaviors on the child's behavior. Emphasize that there are no right or wrong answers.

Give the groups 10 minutes to discuss their situation before returning to the large group. Ask each group to report. Discuss the situation and the listed responses. Allow 5 minutes to discuss each response to a situation. Encourage adolescents to express how a parent's reaction might affect them. If the group has other ideas for responding to a situation, list them on the newsprint.

Discussion Points:

1. What makes it difficult to handle these situations?
2. With which responses were you most comfortable?
3. Which response will make the adolescent more likely to repeat the activity?
4. Which reactions will make the youth more likely to express concerns or questions about sex?
5. What makes one reaction better than another in terms of being a responsive parent?
6. What did you learn from this exercise?
7. For adolescents: To which response would you react most favorably? If you were a parent, what would you do?

BEHAVIOR THEORY (III.7)

Purpose:

To help participants understand what children learn from different types of responses to their behavior.

Materials: None

Time: 30 minutes

Procedure:

Discuss the following concepts in terms that the group can understand. Give examples for each concept. It may help to review theory in an introductory psychology textbook before teaching it. (Example: Ferster, C.B. Behavior Principles. See Appendix B.)

Positive Reinforcement: Child gets something he/she desired (kiss, attention, reward) for behavior; increases likelihood that child will repeat behavior.

Negative Reinforcement: Child increases behavior to avoid or escape unpleasant consequences.

Punishment: Child's behavior results in unpleasant consequence; child may learn temporarily not to repeat behavior with punishing person.

Extinction: Child behaves in certain way to get desired reaction (attention, information); if unsuccessful, child eventually stops trying to get it that way, maybe permanently.

Vicarious reinforcement and punishment: Child's choice of behavior is influenced by what happened when someone else s/he saw or read about behaved in that way.

Give participants additional examples asking them to identify whether it is positive reinforcement, negative reinforcement, punishment, or extinction. Help parents understand the long-range benefits of positive reinforcement.

- Jane asks her mother questions about boys because her mother responds with warmth and understanding (positive reinforcement).
- Rosa always comes home late becaue only then will her parents pay any attention to her (positive reinforcement).
- Joan lies about where she goes on dates to avoid her parents' complaints (negative reinforcement).
- Frank is grounded after his parents walk in on him and his girlfriend (punishment).

- Joe is ignored every time he tries to discuss his relationship with his girlfriend; he stops discussing her (extinction).

- Sally notices that Pam is popular even though she is considered a "good girl"; Sally decides it's okay to say "no" to boys (vicarious reinforcement).

Discussion Points:

1. How are most parents likely to respond when they're upset?

2. How can parents try to use positive reinforcement before negative reinforcement or punishment?

3. What are the problems with extinction?

4. How can adolescents reinforce their parents' behavior?

5. Point out that punishment usually does not eliminate behavior unless it is very severe. Instead, both young children and adolescents frequently learn to hide the behavior that is punished.

6. Explain that one of the strongest influences on children is their parents' "modeling." Children observe how their parents act (swear, help others, procrastinate) and imitate them.

ADOLESCENT'S WORLD (III.8)

Purpose:

To alert parents to influences on adolescent attitudes that may compete with parental values. To expose adolescents to past influences in their parents' lives.

Materials:

Tape recordings of music, album covers (relevant to the group), TV magazines, and magazines for teenagers. Albums, magazines, books, and T.V. program descriptions popular during parents' adolescence. Tape recorders and/or record players.

Time: 30-45 minutes

Planning Note:

To obtain examples of music, magazines, etc., which were popular during the parents' adolescence, ask parents for contributions at the first or second meeting. Magazines and records may also be available at the library.

Procedure:

Divide participants into groups of parents and groups of adolescents. Each group will be responsible for scrutinizing a particular environmental influence on attitudes toward sexuality. Allow approximately 20 minutes.

Music: Play tape recordings of popular songs. Display album covers. Ask participants to listen carefully to the words. Ask participants to think of examples of pressure adolescents receive from their peers, both today and when parents were younger.

Television: Display TV magazines and other television star and soap opera magazines. Ask parents to discuss their child's favorite TV programs. What messages do the children get from the show and commercials? Ask parents to discuss what they would do if they feel a particular program is not good for their child to watch, and whether it is all right for parents to watch a program if they tell their children they may not see it. What messages did television convey to parents in their teen years?

Magazines: Provide various popular magazines for teenagers. Ask participants to scrutinize advertisements, contents of articles, photographs, etc.

Movies: Provide advertisements about films, particularly those geared toward adolescents. What is being used to draw adolescents to see a show? What values are/were portrayed?

When the groups are finished, invite someone from each group to present highlights of his or her group's discussion. Point out the environmental pressure today for adolescents to become sexually active. Ask for additional influences.

Discussion Points:

1. What messages are presented in today's media aimed at adolescents?
2. What do you think about these messages?
3. What impact might they have on adolescents?
4. How are things different now than when parents were teenagers? How are they similar?
5. For parents: How did your parents feel about media influences?

HOMEWORK FOR PARENTS: EVALUATING FEELINGS (III.9)

In the following self-evaluation, please try to describe how comfortable or uncomfortable you would be dealing with the following situations. Rate yourself by circling 1 to 5 depending on your comfort level for each question. If you want to, share your responses with other family members.

not at all comfortable	somewhat comfortable	fairly comfortable	very comfortable	completely comfortable
1	2	3	4	5

	not at all comfortable				completely comfortable
1. How would you feel describing intercourse to your child?	1	2	3	4	5
2. How would you feel if you discovered your child masturbating?	1	2	3	4	5
3. How comfortable would you be if your child sees you nude?	1	2	3	4	5
4. How would you feel describing the menstrual cycle to your daughter?	1	2	3	4	5
5. How do you feel when hugging, kissing and showing affection to your spouse when your children are present?	1	2	3	4	5
6. How would you feel about approaching your son after you find out he is having wet dreams?	1	2	3	4	5
7. How would you feel describing wet dreams to your daughter?	1	2	3	4	5
8. How would you feel describing contraception to your son?	1	2	3	4	5
9. How would you feel describing contraception to your daughter?	1	2	3	4	5

(Source: Planned Parenthood of Wisconsin, Dodge Chapter.)

HOMEWORK FOR ADOLESCENTS: EVALUATING FEELINGS (III.10)

In the following self-evaluation, please try to describe how comfortable or uncomfortable you would be dealing with the following situations. Rate yourself by circling 1 to 5 depending on your comfort level for each question. If you want to, share your responses with other family members.

not at all comfortable	somewhat comfortable	fairly comfortable	very comfortable	completely comfortable
1	2	3	4	5

	not at all comfortable				completely comfortable
1. How would you feel if your mother/father described sexual intercourse to you?	1	2	3	4	5
2. How would you feel if your parents discovered you masturbating?	1	2	3	4	5
3. How would you feel if your father described menstruation to you?	1	2	3	4	5
4. How would you feel if your mother described menstruation to you?	1	2	3	4	5
5. How do you feel when you see your parents hugging, kissing, and showing affection?	1	2	3	4	5
6. How would you feel if your father described wet dreams to you?	1	2	3	4	5
7. How would you feel if your mother described wet dreams to you?	1	2	3	4	5
8. How would you feel if your mother described contraception to you?	1	2	3	4	5
9. How would you feel if your father described contraception to you?	1	2	3	4	5

(Source: Planned Parenthood of Wisconsin, Dodge Chapter.)

Supplement 1

BILL OF RIGHTS

FOR FAMILIES WHO WANT TO COMMUNICATE EFFECTIVELY ABOUT SEXUALITY

1. Mothers and fathers involved with childrearing should play an active role in the sex education of their children.
2. Parents don't have to be experts on sexuality.
3. Parents have a right to set standards for conduct in the family.
4. Parents have the right to express feelings and attitudes about sexuality to their children.
5. Parents have a right to privacy.
6. A child has a right to have opinions about family standards.
7. A child has a right to discuss sex with his/her parent(s).
8. A child has a right to sexual knowledge.
9. A child has a right to privacy.
10. A child shouldn't be punished for his or her feelings.

Supplement 2

SITUATION: WET DREAM

A parent finds her son, looking guilty and embarrassed, stuffing his sheets into the washing machine. What happens if the parent:

1. Accuses the child of wetting the bed?

2. Ignores the situation?

3. Asks the child if he is having wet dreams?

4. Lets the situation pass and later brings up a discussion of wet dreams?

Supplement 3

SITUATION: MAKE OUT PARTY

A parent interrupts a party of 12-year-olds; the lights are out and couples are kissing and hugging. What happens if the parent:

1. Ignores the situation?

2. Turns the lights on and sends everyone home?

3. Takes his/her child aside and discusses the situation, then requests that lights be left on?

4. Distracts the children with another activity like serving refreshments?

5. Ignores the situation and discusses it with the child the next day?

Supplement 4

SITUATION: MENSTRUATION

A parent recognizes that the daughter will soon go through puberty. The parents want to prepare their child for menstruation. What happens if:

1. One of the parents gives the daughter a book about menstruation?

2. Both parents have a discussion about puberty with their daughter?

3. The mother buys her daughter supplies but does not discuss it?

4. The mother tells her daughter that she will soon begin to menstruate and that if she has any questions, she is welcome to come to her to discuss them?

5. The father briefly discusses puberty with his daughter and then goes to the drug store with her to buy supplies and encourages her to ask questions?

Supplement 5

SITUATION: CONTRACEPTION (DAUGHTER)

While cleaning up the 16-year-old daughter's room, a parent finds birth control pills. What happens if the parent:

1. Punishes the child with a 9:00 curfew for 1 month?

2. Yells at the child, asking, "Where have we gone wrong?"

3. Pretends that nothing was found?

4. Calmly discusses the responsibilities of sexual behavior and birth control?

5. Calmly discusses how the daughter has disappointed the parents?

6. Congratulates the daughter for having the good sense to use birth control?

7. Discusses the morality of sexual activity?

Supplement 6

SITUATION: CONTRACEPTION (SON)

While cleaning up the 16-year-old son's room, a parent finds comdoms. What happens if the parent:

1. Punishes the child with a 9:00 curfew for 1 month?

2. Yells at the child, asking, "Where have we gone wrong?"

3. Pretends that nothing was found?

4. Calmly discusses the responsibilities of sexual behavior and birth control?

5. Calmly discusses how the son has disappointed the parents?

6. Congratulates the son for having the good sense to use birth control?

7. Discusses the morality of sexual activity?

Unit IV

VALUES

OVERALL GOAL:

To help participants explore their values about sexuality issues.

RATIONALE:

Both parents and adolescents are exploring their own values by this time in the course. The last unit explored areas which were specific issues or concerns in participants' homes. This unit expands that inquiry by exploring the issues in greater depth and introducing areas that may not have been covered. Adolescents are in a process of developing their values, trying on different stances, perhaps experimenting with different ways of behaving. Because they are developing, the position they express today is not necessarily the position they will take tomorrow or next year. Parents also live in a changing society, and while their values are more permanent, most parents still have ideas, feelings, and attitudes which they have not thought through as adults.

This session provides a forum which supports participants' efforts to explore their own values by listening to and sharing with other class members. Most people find it helpful to discover 1) that their values are respected by the facilitator; 2) that others have different perspectives; and 3) that it is normal to be ambivalent or inconsistent about values.

BEHAVIORAL OBJECTIVES:

1. To consider and explore participants' attitudes about sex-related topics. (Activities IV.1, 2, 3-16, and 18-23)

2. To discuss ways parents can impart their values to their children. (Activities IV.2, 9, and 18-23)

3. To examine societal influences on the development of sexual attitudes. (Activities IV.17 and 18)

UNIT IV OVERVIEW

Name of Activity	Estimated Minutes	Type of Activity	Materials Required	Age of Children	Page No.
1 Letter from College	10-15	Presentation	None	13-18	89
2 Values List	20-30	Exercise	Newsprint	15-18	91
3 Beth and David	30-45	Exercise	3x5 Cards	13-18	92
4 Voting on Values	20-40	Exercise	None	15-18	94
5 Planet X	30-45	Exercise	Newsprint	16-18	95
6 Attitudes Toward Abortion	20-30	Exercise	Supplement 1	15-18	96
7 Ranking Feelings	20-30	Exercise	Supplement 2	15-18	97
8 Questionnaire on Opinions of Sexuality	15-20	Exercise	Supplement 3	15-18	98
9 Teenagers and Sexual Expression	30-45	Exercise	Supplement 4, Large Signs	15-18	99
10 Values Checklist	30-45	Exercise	Supplement 5	13-18	100
11 How Would I Feel If...	25-30	Exercise	Supplements 6, 7 & 8	11-18	101
12 The Nurse's Dilemma	10	Exercise	None	11-18	102
13 Just Imagine	20-30	Reading	Supplement 9	13-18	103
14 Sex (Gender) Roles	20-35	Exercise	Supplement 10	13-18	104
15 Film: Sex Roles	30-40	Film	Projector	11-18	105
16 Gender Role Assessment	20-30	Exercise	Supplement 11	13-18	106
17 Killing Us Softly	50	Film	Projector	12-18	107
18 Who's Responsible?	30-45	Exercise	Newsprint	13-18	108
19 Film: Adolescent Sexuality	40-60	Film	Projector	13-18	110
20 Film: Adolescent Dilemmas	30	Film	Projector	11-18	111
21 What Do You Want?	30	Exercise	3x5 Cards	11-18	112
22 When is a Person Ready for Sex?	25-40	Exercise	3x5 Cards	15-18	113
23 Homework: What are Your Views?	15	Exercise	Handout	13-18	114

LETTER FROM COLLEGE (IV.1)

Purpose:

Warmup activity to help participants gain humor and perspective; to recognize that values are relative.

Materials: None

Time: 10-15 minutes

Procedure:

Introduce this session by emphasizing that its purpose is not to persuade participants to support any particular values, but rather to encourage them to think through their own personal values and attitudes. Read the "Letter from College."

Dear Mom and Dad,

It's been 3 months since I left for college. I have been remiss in writing and I am very sorry for my thoughtlessness in not having written before. I will bring you up to date now, but before you read on, please sit down. You are not to read any further unless you are sitting down. OK?

Well, then, I am getting along pretty well now. The skull fracture and concussion I got when I jumped out of my dormitory window when it caught fire shortly after my arrival is pretty well healed now. I only spent two weeks in the hospital and now I can see almost normally and only get these sick headaches once a day.

Fortunately, the fire in the dormitory and my jump was witnessed by an attendant at the gas station near the dorm, and he was the one who called the fire department and the ambulance. He also visited me in the hospital and since I have nowhere to live because of the burnt out dormitory, he was kind enough to invite me to share his apartment with him. It's really a basement room but it's kind of cute. He is a very fine boy, and we have fallen deeply in love and are planning to get married. We haven't set the exact date yet, but we will before my pregnancy begins to show.

I know you are looking forward to being grandparents and I am sure you will welcome the baby and give it the same love and devotion and tender care that you gave me when I was a child. The reason for the delay in our marriage is that my boyfriend has a minor infection that prevents us from passing our premarital blood tests, and I carelessly caught it from him. This will soon clear up with the penicillin injections I am taking daily.

I know you will welcome him into our family with open arms. He is kind and although not well educated, he is ambitious. Although he is of a different race and religion than ours, I know by your expressed tolerance that you will not be bothered by that fact.

Now that I have brought you up to date, I want to tell you that there was no dormitory fire. I did not have a concussion or skull fracture. I was not in the hospital and I am not pregnant. I am not engaged, do not have a disease, and there is no miscegenation in my life. However, since I am getting a "D" in history and an "F" in science, I wanted you to see these marks in proper perspective.

Hope you are both well. I will try to get home soon.

Your loving daughter,

Sue

Discussion Points:

1. Ask participants for comments.

VALUES LIST (IV.2)

Purpose: To help participants identify their own values.

Materials: Newsprint, magic markers

Time: 20-30 minutes

Procedure:

Divide the class into groups of five. Separate parents and their children. Ask each group to list on newsprint the sexual values that are important in their own lives. Instruct the parents to choose values from these lists that they would like to pass on to their children. Ask the group of adolescents to list the important values that they would like to hear from their parents. Discourage arguments between parents and children. At some point in the discussion have the groups list values they agree on. Have groups post both lists and discuss them.

Discussion Points:

1. Which values did all groups agree on?

2. How are parents attemping to communicate their values to their children?

BETH AND DAVID (IV.3)

Purpose:

To help participants explore their attitudes about sexual responsibility and communication.

Materials: Index cards and pens

Time: 30-45 minutes

Procedure:

Tell participants that you are going to read them a story about five people. Explain that they are to rank the characters from 1-5, with 1 being the character they liked least and 5 being the character they liked most. Let people know that this activity will help them consider their own values concerning relationships and sexual responsibility. Pass out index cards and pens to each person. Read the following story:

> David and Beth are engaged to be married. David is an apprentice in a 2-year school in California. Beth is in college in Pennsylvania and shares a class with Carl. She and Carl become good friends and eventually sleep together. Beth decides she doesn't feel right about having intercourse with Carl and discusses it with him. They decide to stop.
>
> Some time passes. Carl tells Beth he is driving to California at spring break. Beth asks Carl to take her along, so she can see David. Carl says, "Okay, but remember we'll be on the road 3 nights."
>
> Beth is uncertain what to do. She talks to her close friend, Ann, about it. Ann says "Do what you think is best." Beth decides to go with Carl. Meanwhile, David has been dating a girl who lives near him in California.
>
> When Beth gets to California she tells David about her relationship with Carl. David gets angry and breaks off the engagement because he feels he can't trust her.
>
> Beth returns home where she soon meets Edward. She is still upset over the situation and confides in him, telling him all. Edward asks her to come live with him.

Now read the list of characters:

David . . . . . Beth's fiance
Beth . . . . . David's fiancee
Carl . . . . . Beth's college classmate
Ann . . . . . Beth's close friend
Edward . . . . Beth's new acquaintance

Ask participants to think about each character. Who did they like? Who didn't they like? Rank the characters 1-5 on index cards.

List the characters on newsprint or a blackboard. Ask individuals to vote on who they liked best, least, etc. Encourage participants to explain how they made their choices. Allow time for discussion.

Discussion Points:

1. Point out the assumptions that individuals may have made about the characters. Someone may have assumed, for example, that Carl was asking Beth to have sex with him when he said, "Remember we'll be on the road 3 nights."

2. Which character would you like most as your own child? Least?

3. For parents: How have you or will you influence your children's values about sexual responsibility?

VOTING ON VALUES (IV.4)

Purpose: To help parents and adolescents explore their own sex-related values.

Materials: None

Time: 20-40 minutes

Procedure:

Instruct participants that you will read a series of value statements. They are to indicate how they feel on each position by "thumbs-up" (agree), "thumbs-down" (disagree), "shake hands" (maybe), and "arms folded" (no comment). After each statement, give individuals an opportunity to defend their positions. Make sure that a variety of values are represented.

Alternative: Designate one side of the room as "strongly agree" and the other as "strongly disagree." Ask participants to take a position along the continuum for each statement. Discuss positions after each statement.

Sample value statements:

a. Birth control should be the woman's responsibility.
b. Minors should be able to get birth control without notifying parents.
c. Our government should pay for birth control methods for everyone who wants them.
d. Parents should be the only ones allowed to give sex information to their children.
e. Birth control information should be available to all high school students.
f. I would want my daughter to be a virgin when she graduates from high school.
g. Men and women should share household responsibilities.
h. Women should stay home to raise their children.
i. Girls should not ask boys out on dates.
j. Both men and women should feel free to initiate sex.
k. Homosexuals should not be allowed to teach school.
l. Sex should be reserved for marriage.
m. I would want my son to be a virgin when he graduates from high school.

Discussion Points:

1. How did you feel about taking a stand on these issues?

2. Did the discussion give you any new perspectives?

PLANET X (IV.5)

Purpose:

To help participants consider which sex-related behaviors society should be illegal.

Materials: Newsprint and magic markers

Time: 30-45 minutes

Procedure:

Tell group members that you want them to participate in a social experiment. Divide them into small groups. They are being sent to develop a colony on Planet X where there are no laws. Their task is to develop a set of laws to govern sex-related behavior -- marriage, non-marital sex, homosexuality, specific sexual acts, etc. Give each group a sheet of newsprint and a magic marker. Ask one person to be recorder. After 15-20 minutes ask the recorders to describe the laws that their groups established and the reasons they established them.

Discussion Points:

1. Why is it necessary to control sex-related behavior?

2. Who in our society needs to be protected?

3. Is sex just for pleasure acceptable?

4. Do you disagree with any laws in our society?

ATTITUDES TOWARD ABORTION (IV.6)

Purpose: To help participants consider their attitudes toward abortion.

Materials: "Attitudes toward Abortion" (Supplement 1)

Time: 20-30 minutes

Planning Note:

This exercise is useful with a wide variety of groups if the leader is clear that s/he is not promoting a position on abortion, but is interested in helping participants clarify their own positions. Carefully assess your group, however, to ascertain whether this exercise would be divisive rather than helpful.

Procedure:

Ask participants to read each of the vignettes and decide whether or not the woman should get an abortion. Remind them that choosing an abortion does not mean they are happy about it or have no negative feelings about it, but rather that they feel it is the best choice under the circumstances.

You as a facilitator must not support any particular position.

Discussion Points:

1. How many said yes to all the women? How many said no to all?

2. How many said yes to some and no to some?

3. Why did you take a particular position?

RANKING FEELINGS (IV.7)

Purpose: To help participants identify what values they hold most strongly.

Materials: "Ranking Your Feelings" (Supplement 2)

Time: 20-30 minutes

Procedure:

Distribute the Supplement. Ask participants to rank their feelings for each item, with 1 being their first choice, 2 their second choice and 3 their third choice. Let participants complete this on their own.

Discussion Points:

1. Were some items more difficult than others? Which ones?

2. Were you surprised with any of your answers? Which ones?

3. For parents: Do you think your partner would answer the same way? What would be different?

4. For parents: Were you surprised by any of your children's answers? Which ones? Why?

5. For adolescents: Were you surprised by any of your parents' answers? Which ones? Why?

QUESTIONNAIRE: OPINIONS ON SEXUALITY (IV.8)

Purpose: To help participants explore their attitudes about their own sexuality.

Materials: "Opinions on Sexuality" (Supplement 3)

Time: 15-20 minutes

Procedure:

Give participants the questionnaire as homework and ask them first to respond with their personal answers, then to complete the questionnaire as they think their parent or child would. Each person should do this separately, then compare their answers with other family members. Discussion can take place at the beginning of the next session.

Discussion Points:

1. Which questions aroused particularly strong feelings in you? In your parent/child?

2. Where did you misjudge your parent's/child's true feelings?

3. Where do your feelings differ significantly?

4. Which attitudes would you like to change (either for yourself or for your parent/child)?

TEENAGERS AND SEXUAL EXPRESSION (IV.9)

Purpose:

To explore parents' and adolescents' attitudes toward adolescent sexual behavior.

Materials:

"Teenagers and Sexual Expression" (Supplement 4). Three signs -- one marked A, one B, and one C -- placed in different parts of the room.

Time: 30-45 minutes

Procedure:

Introduce this session as follows: "Many parents admit that they fear the teenage years the most, especially the risk of their child having an unwanted pregnancy. It is also a difficult time for teenagers themselves. Let's focus on three teenage couples, the decisions that they have made, and the reasons behind these decisions."

Indicate three areas in the room which represent three different attitudes:

A. Feel okay about this behavior
B. Unsure
C. Disapprove of this behavior

Read the first situation. Ask those people who feel okay about the behavior to move to space "A," those who are unsure to space "B," and those who disapprove to space "C." Ask the people in each group to spend about 5 minutes sharing the rationale for their attitude. Then have volunteers from all three groups summarize the issues that were raised in their groups. After 5-10 minutes read situation 2. Repeat the same procedure for situations 2 and 3.

Alternatively, distribute the supplement and have participants discuss the situations in small groups.

Discussion Points:

1. Summarize feelings that surfaced during the exercise.

2. How do attitudes of parents and adolescents compare?

3. Were adolescents surprised to hear their parents' attitudes? If so, in what way?

VALUES CHECKLIST (IV.10)

Purpose:

To help participants become clear about what they consider acceptable behavior for themselves and others.

Materials: "Values Checklist" (Supplement 5)

Time: 30-45 minutes

Procedure:

Introduce this session in this way: "I would like to push you to be even more specific about your values. Let's try yet another exercise, to sort out what is okay and what is not okay in your family."

Distribute the checklists and ask participants to complete them. Parents should respond as if the children were their own, even if they don't have children of the particular sex mentioned. Adolescents should respond as if the children were their best friends. Ask participants to choose partners and share with each other as much as they feel comfortable. Stress that they don't have to reveal their answers.

Discussion Points:

1. Is your attitude about a specific behavior a deeply held value, or a carry-over from what your own parents would have said?

2. What differences do you notice between the hypothetical people (identified by age) and your family and self? Between male and female children? Between different aged children?

3. How do your attitudes affect the way you discuss sexuality with your friends? Your children? Your parents?

4. How do you react to people who have indicated different levels of acceptance for some items?

Homework:

Instruct parents to draw two more columns on their sheet of paper. Label one "myself" and the other "my partner." Ask parents to fill out the additional columns, emphasizing that their responses will not be shared.

"HOW WOULD I FEEL IF ..." (IV.11)

Purpose:

To help participants identify feelings they may have about various situations.

Materials:

"How Would I Feel If ..." (Supplement 6 for parents and 7 for adolescents) and "Feeling Words" (Supplement 8).

Time: 25-30 minutes

Procedure:

Ask participants to complete Supplements 6 or 7 with their own feelings. Each situation should be followed by three feelings. Explain the difference between thoughts and feelings and ask participants to give examples of feeling words. Distribute Supplement 8 which lists a variety of feeling words.

Separate parents and children. Ask the participants to form groups of three and share attitudes and stories about these situations. Encourage participants to imagine how they would respond and what they think their children or parents would do. Bring the group back together and ask participants to share their attitudes and methods of responding to these situations.

Discussion Points:

1. When faced with a situation, can you have more than one feeling about it?

2. Is there always a predominant feeling?

3. Where does your reaction come from? Your parents? Your church? Your friends?

4. Try to identify why you feel the way you do. Are you afraid your child will embarrass you or be emotionally or physically hurt? Are you worried about what your parents will think? Emphasize that these are all reasonable concerns. The goal is to better understand our fears so that we can examine them and assess their legitimacy.

THE NURSE'S DILEMMA (IV.12)

Purpose:

Warmup activity to help participants recognize the prevalence of sex-role stereotyping.

Materials: None

Time: 10 minutes

Procedure:

Read the following story to the class. Don't tell them it has to do with sex-role stereotyping. Ask people who already know the answer to keep it to themselves.

> A mother and her daughter were driving to a ballet performance. On the way, they were in an accident. The mother was killed and the daughter was brought into the emergency room of the local hospital. Nurse Jones was called in to treat the girl. The nurse took one look at the girl and said, "I can't treat this girl, she's my daughter!" How is this possible?

Encourage participants to try the story on other family members.

Discussion Points:

1. What makes it difficult to get the answer immediately? Did it take you long to get the answer?
2. What other sex role stereotyping is evident in the story?
3. Are you aware of sex role stereotypes that you have?
4. What are your views on the subject?

JUST IMAGINE (IV.13)

Purpose: Warmup activity to introduce sex-role stereotyping.

Materials: "Just Imagine" (Supplement 9)

Time: 20-30 minutes

Procedure:

Read the "Just Imagine" story out loud and ask parents to share their thoughts about it. Alternatively, distribute copies of the story for them to read outside of class.

Discussion Points:

1. What do you believe are appropriate roles for men? For women?

2. What were you taught by your parents? By your religion?

3. Point out that society has changed since parents were young. For example, Saturday morning cartoons now depict female superheroes.

SEX (GENDER) ROLES (IV.14)

Purpose: To help participants explore their attitudes about sex roles.

Materials: "Answer Sheet" (Supplement 10)

Time: 30 minutes

Procedure:

Distribute Supplement 10. Read each word and ask participants to quickly decide whether they think it is a masculine or feminine trait and mark their decision "M" (masculine) or "F" (feminine) on the answer sheet. Tell group members to mark their first reaction, not their educated, thoughtful response. Have the group discuss their responses. Be careful not to endorse any sex roles, stereotyped or nonstereotyped. Let the group set the tone.

Discussion Points:

1. Do you see one sex as having more positive traits than the other?

2. Do you personally have traits that you labeled feminine? That you labeled masculine? Both?

3. Do you ever envy the opposite sex for their freedom to exhibit a characteristic trait or emotion?

4. Are there any characteristics that parents and teenagers labeled differently?

FILM: SEX ROLES (IV.15)

Purpose:

To help participants explore attitudes toward sex roles and to help them understand the origins of sex-role differences.

Materials:

Projector, screen and film:
"Happy To Be Me" [Arthur Mokin Productions]
"Boys Don't Do That" [Planned Parenthood of Memphis]

Time: 30-40 minutes

Procedure:

Introduce film and show it. Choose the film that seems most appropriate for the group. See Appendix A for a description of each film.

Discussion Points:

1. How did you feel about the film?
2. Did/do your parents treat you in a specific way because of your sex?
3. For parents: How does your behavior differ with your daughter versus your son?
4. For parents: How would you want your male and female children to be different? To be similar?
5. For adolescents: Do you perceive any differences in the way that you and opposite-sex siblings are treated?
6. For adolescents: Does your behavior differ with your mother versus your father?

GENDER ROLE ASSESSMENT (IV.16)

Purpose:

To help participants evaluate their own masculinity or femininity and recognize that people can have traits stereotypic of both sexes.

Materials: "Gender Role Assessment" (Supplement 11)

Time: 20-30 minutes

Procedure:

Distribute Supplement 2 and have group members rate themselves from 1-5 on each of the characteristics:

While they are working, draw two continua on the board:

not at all feminine	very feminine

not at all masculine	very masculine

When they have finished, point out that few people are exclusively masculine or exclusively feminine in their behavior. Masculinity and femininity are not at opposite ends of a continuum but rather constitute two different dimensions.

Explain that the Assessment is organized in groups of two characteristics: the first masculine and the second feminine. Ask them to sum their "a's" and "b's". If both a's and b's are high, the person is considered androgynous; that is, s/he holds both stereotypic male and stereotypic female characteristics. If a's are high and b's are low s/he holds stereotypic masculine characteristics; if a's are low and b's are high, feminine.

Discussion Points:

1. If you had completed this inventory 15 years ago, would your answers be different or similar? Why?

2. If you have a child of your sex, would his/her inventory be different or similar? Why?

KILLING US SOFTLY (IV.17)

Purpose:

To alert participants to the subtle ways in which children and adults are influenced by the media.

Materials: Slide projector, slide package "Killing Us Softly"

Time: 50 minutes

Procedure:

Begin the slides with no introduction. When you finish, pause before turning on the lights, giving participants a chance to reflect. Then ask for general reactions.

Discussion Points:

1. What are the primary messages from the media?

2. What are the implications for parents' responsibilities?

WHO'S RESPONSIBLE? (IV.18)

Purpose:

To explore the roles of teenagers, parents, and helping professionals in preventing an unplanned pregnancy. To help participants recognize the complexity and diversity in values.

Materials: Newsprint and magic markers

Time: 30-45 minutes

Procedure:

Read the following story with feeling:

> This is a story about John and Donna. Donna is 15 and has been dating John for the last 2 months. John is 17 and will be going to college in the fall. Since the beginning of summer, the couple has become very close. Not only do they enjoy swimming and playing together, but they have been spending their evenings kissing and exploring each other's bodies. Donna was beginning to consider having sex with John even though she was afraid to. Before long, August had come and it was time for John to go off to college. On the night before he left, it just happened. They had sex.
>
> For the next 2 weeks Donna worried all day and night. Every time she went to the bathroom she checked her underwear for a sign of her period. Finally, she started menstruating. Donna vowed that she would not let that happen to her again. She would find out where she could obtain a method of birth control before John returned home. The first person that came to mind was her older sister Janet, aged 27, who was married and living in the same town. On her next visit to Janet she said, "Janet, you know that I've been seeing John... and... well we had sex and I worried all month that I was pregnant. I'm not, but I was wondering if you could tell me where I could get some birth control."
>
> Janet replied, "You did what? You ought to be ashamed of yourself. If I ever hear about you doing anything like that again, I'm telling Momma!"
>
> Donna was disappointed, but decided to try somebody else. Since starting back to school, she had developed a friendly relationship with her English teacher, Ms. Johnson. She decided to ask her for help. So the next day at school she stayed after English class to talk with Ms. Johnson. When she asked for information about birth control, Ms. Johnson replied, "Donna, I really would like to help you. Unfortunately, the school policy states that I cannot give you any such information."

Now Donna was extremely discouraged. She thought and thought and finally decided to call a doctor. She looked in the phone book and found a Dr. Jones. She called and made an appointment, stating that she was having a problem with her menstrual cycle. After her examination, Dr. Jones told Donna that everything was just fine. She said, "Well, Dr. Jones, since I'm here, do you think you could give me some information about birth control?"

He replied, "How old are you--15? I'm sorry, dear. Why don't you come back in a few years!"

At this point Donna was desperate. John was due home for vacation in a few days and she still had no birth control. It just wasn't fair. As a last resort, she considered her mother. Maybe she could get her nerve up to ask her for help. The next morning at the breakfast table she looked over at her mother and started to ask her, but the words just wouldn't come out. She got up quickly and rushed out of the house for school.

Two days later John arrived home on vacation. They were very happy to see each other again and made love several times. A month later Donna ended up at the doctor's office with a positive pregnancy test.

Ask participants to form small groups and to think about the characters in the story. Rank from most to least who is responsible for Donna's pregnancy:

- Donna
- John
- Janet
- Ms. Johnson
- Dr. Jones
- Mother

Make sure that participants explain why they ranked the characters as they did. Emphasize that there are no "right" answers. Have each group report their conclusions.

Discussion Points:

1. What was the mother's responsibility in this situation?

2. How could John and Donna have taken more responsibility for their own behavior?

3. If Donna had come to you, what would you have told her?

FILM: ADOLESCENT SEXUALITY (IV.19)

Purpose:

To help participants explore their attitudes toward adolescent sexuality. To practice communicating about sexuality.

Materials:

Projector, screen and film:
- "Mother, May I?" [Shared Futures Films]
- "It's Up To Laurie" [Centron Films]
- "Teenage Father" [Children's Home Society of California]
- "Shelley, Pete... and (Carol)" [Modern Talking Picture Service]
- "Too Soon Blues" [Cine-Image Film, LTD]

Time: 40-60 minutes

Procedure:

Preview the films to decide which is most relevant for your group. Tell the group that you are going to show a film involving an adolescent and his or her family in which the teenager is making decisions about sexuality. After the film, ask the group how they would have handled each situation. If time permits, have participants role play one of the discussions about sexuality that came up in the film. If "It's Up To Laurie" is shown, mention that a conservative parenting style does not necessarily lead to an adolescent pregnancy.

Discussion Points:

1. What did you think of the adolescents in the film?
2. What did you think of the adults?
3. For parents ("It's Up To Laurie"): Which parenting style most resembled your own?
4. For parents: What messages have you given your child about premarital sex, relationships, birth control, etc.?
5. For parents: Can your child come to you with questions? How have you communicated this?
6. For parents: Do you have different attitudes toward male and female children about premarital sex?
7. For parents ("Mother, May I?"): How would you continue the conversation with your children?
8. For adolescents: Can you go to your parents with questions?
9. For adolescents: How do you think the lead character should have handled herself or himself?

FILM: ADOLESCENT DILEMMAS (IV.20)

Purpose:

To explore dilemmas facing preadolescents and adolescents. To help parents consider their role in problem solving.

Materials:

16mm projector, screen, and film:
"Adrianne's Man" [Planned Parenthood of Memphis]
"In Between" [Planned Parenthood of Memphis] (for groups with young adolescents, aged 11-13)
"Wayne's Decision" [Planned Parenthood of Memphis]

Time: 30 minutes

Planning Note:

Preview films to choose the most appropriate film for your audience. "Adrianne's Man" and "Wayne's Decision" are more relevant for parents of adolescents. "In Between" is more relevant for parents of preadolescents. Since trigger films are so short, more than one could be shown during this session.

Procedure:

Introduce the film. Explain to participants that a trigger film is very short; the issue will be left unresolved. After the film, ask group members to speculate about what happens.

Discussion Points:

1. What do you think the teenager decides to do? What should he/she do?
2. For parents: What would you want your child to do?
3. For parents: How might you discuss these issues with your child?
4. For adolescents: How might you discuss these issues with your parent?

WHAT DO YOU WANT? (IV.21)

Purpose: To help parents and adolescents express what they want from each other.

Materials: Index cards

Time: 30 minutes

Procedure:

Ask parents and adolescents to think about what they want from each other, not including material things. Ask them to write their anonymous requests on index cards and to indicate whether they are parent or adolescent. Collect index cards. Read them aloud, alternating between parent and adolescent requests. Ask for comments from the group.

Discussion Points:

1. Do either parents or adolescents have any responses?

2. Did parents or adolescents hear anything new?

WHEN IS A PERSON READY FOR SEX? (IV.22)

Purpose:

To help participants consider when a person is ready for sex and ways to demonstrate responsibility for sexual behavior.

Materials: 3x5 cards

Time: 25-40 minutes

Procedure:

Explain that it is very difficult to determine when a person is ready to handle the responsibility of sexual behavior. Adolescents may be receiving conflicting messages about experimenting with sex. It is useful for parents and teenagers to discuss their attitudes about when sexual behavior is appropriate and responsible.

Tell participants that you want them to respond anonymously to two questions. Distribute index cards. Read the following question and ask each participant to write a brief response on one side of the index card:

> When is a person ready for sex?

Now ask the second question and have participants write their answers on the other side of the index card:

> If a teenager does begin having sex, how can he or she do so responsibly?

When everyone has finished, collect the cards. Divide participants into small groups. Family members should be in separate groups. Shuffle the cards and redistribute them. Be sure that no one gets his or her own card. Ask participants to read the cards and discuss them in the small groups. Assure participants that their personal response can remain anonymous. After about 20 minutes, have each group report on the discussion.

Discussion Points:

1. How much agreement was apparent in the responses?
2. How did participants define sexual responsibility?
3. How should personal and family values influence the decision to have sex?
4. How should personal and family values influence the way a person handles a sexual relationship?

HOMEWORK: WHAT ARE YOUR VIEWS? (IV.23)

Directions: Complete the following sentences.

After you have completed the sheet, talk about your responses with your parent or adolescent child. If they have also completed a sheet, have them share their responses with you.

Experiencing an unplanned pregnancy would be _____.

Abortion is _____.

Adoption is _____.

Being a single parent would be _____.

Being a teenage parent would be _____.

If my daughter got pregnant, I would _____.
-OR-
If I got pregnant, I would _____.

If my son got someone pregnant, I would _____.
-OR-
If I got someone pregnant, I would _____.

(Source: Abbey-Harris N. and K.R. Todd, Saying Goodbye to the Birds and the Bees.)

Supplement 1

ATTITUDES TOWARD ABORTION

Consider the following situations. Assume that all of the women have gone to a clinic and requested an abortion. Decide for each woman whether you think she should get an abortion.

	YES	NO
1. Mary is married and in her late 20's. She wanted to wait another year before having her second child. She finds out she is 6-weeks pregnant.		
2. Gail has already had three abortions. She feels abortions are so easy, why take birth control. She is 2-months pregnant.		
3. Joan is married and pregnant. Her doctor told her childbirth would be particularly dangerous for her.		
4. Sue has just gotten over German measles. She now finds out she is pregnant.		
5. Sally has been told that her 3-month-old fetus will be born with brain damage.		
6. Tom and Jane are thinking about getting married. Jane becomes pregnant and Tom feels it is a trick to push him to get married sooner.		
7. Louise finds out she is 2-months pregnant. Exactly 2 months earlier she was raped.		
8. Ellen is 21 and unattached. She has a casual affair and becomes pregnant.		
9. Terry is 45. She has finished raising four children and finds out she's pregnant.		
10. Maggie is 13 when she first has sexual intercourse. She becomes pregnant the first time.		
11. Eleven-year-old Sandy is made pregnant by her uncle.		
12. Fran becomes pregnant with her third child in 4 years, a few weeks before her husband deserts her. She has no means of financial support.		

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	YES	NO
13. Joe and Martha have a good marriage. Martha becomes pregnant. Even though the baby was an accident she wants to keep it. Joe doesn't.		
14. Marilyn and Frank have a good marriage. She becomes pregnant. He wants to keep the baby, she wants to have an abortion.		
15. Jim and Melinda have just reconciled and are getting along beautifully. Melinda finds out she is pregnant as a result of a brief affair after Jim had left her.		

Supplement 2

RANKING YOUR FEELINGS

For each item, mark which response would be your first, second, and third choices.

1. The phrase which best describes (described) me as an adolescent is:

_____ shy
_____ behavior problem
_____ well adjusted

2. The thing I'd most like to overhear someone saying about me would be that I'm:

_____ attractive
_____ understanding
_____ intelligent

3. The thing that would upset me most would be if a friend told me that she:

_____ is being unfaithful to her boyfriend/husband
_____ is having an affair
_____ recently had an abortion
_____ gets beaten by her partner

4. If a neighbor were talking with me about her 13-year-old daughter, the thing that would concern me most would be her telling me that:

_____ she feels her daughter is too young to learn about sex
_____ her daughter is taking birth control pills
_____ her daughter is allowed to be alone in her room with boys
_____ her daughter is not allowed to attend co-ed parties

5. The worst thing I could find out about my partner (spouse or steady) would be that s/he:

_____ has syphilis
_____ is in love with someone else
_____ is not interested in sex of any kind

6. What is harder for you?

_____ Expressing anger
_____ Telling someone that you love him or her
_____ Expressing hurt feelings

Supplement 3

OPINIONS ON SEXUALITY

Record the one response that best reflects your feelings and the one you think reflects your parents' or child's feelings.

YOUR ANSWERS		YOUR PARENTS' OR CHILD'S PROBABLE ANSWERS
____	1. Who should be responsible for contraception? a. man b. woman c. both	____
____	2. Who should be responsible for children's sex education? a. father b. mother c. both d. neither	____
____	3. For whom is masturbation acceptable? a. man b. woman c. both d. neither	____
____	4. Who should initiate sexual activity? a. men b. women c. both	____
____	5. Sex belongs: a. no where b. in the bedroom c. anywhere inside d. anywhere where there is privacy e. everywhere	____
____	6. Sex is appropriate: a. at night b. only when it is dark c. any time	____
____	7. Sex on TV makes me: a. angry b. curious c. entertained d. disgusted e. frustrated	____

YOUR ANSWERS		YOUR PARENTS' OR CHILD'S PROBABLE ANSWERS
____	8. Sex outside of marriage is tolerable for: a. men b. women c. both d. neither	____

9. What activities do you think are okay for a 16-year-old girl to do in the following situations? Use a check mark (✓) to indicate any activities that you feel are okay and an (X) to indicate those you think your parent or child feels are okay.

	KISSING	PETTING	HAVING SEXUAL INTERCOURSE	NONE OF THESE
If a girl and boy are strangers				
If a girl and boy are friends or are dating				
If a girl and boy are going with each other				
If a girl and boy are in love				
If a girl and boy are planning to get married				

10. What activities do you think are okay for a 16-year-old boy to do in the following situations? Use a check mark (✓) to indicate any activities that you feel are okay and an (X) to indicate those you think your parent or child feels are okay.

	KISSING	PETTING	HAVING SEXUAL INTERCOURSE	NONE OF THESE
If a girl and boy are strangers				
If a girl and boy are friends or are dating				
If a girl and boy are going with each other				
If a girl and boy are in love				
If a girl and boy are planning to get married				

Supplement 4

TEENAGERS AND SEXUAL EXPRESSION

Read each situation below. Parents: How would you feel if the teenagers described were your children? Adolescents: How would you feel if the teenagers described were your best friends?

Indicate your response using the following scale:

A - I feel OK about this behavior.

B - I am not sure how I feel about this situation.

C - I disapprove of this behavior.

Situation 1

Sue is 15 years old and Todd is 16. They have been dating steadily for about 7 months. They are both good students, responsible and mature for their age. At the end of a date, they regularly park in some secluded spot. They partially undress each other and caress to climax. They have decided not to have sexual intercourse because they fear pregnancy and do not want to cause their parents any disappointment.

Situation 2

Jane is 17 and Mike is 18 years old. They are high school seniors. They have been dating steadily for 2 years and are talking about getting married some time after graduation when both have found jobs. At least once a week, they arrange enough time and privacy to have sexual intercourse, usually in Jane's home. They have chosen not to discuss their sexual intimacy with their parents. They feel this is their own private concern. Jane is using birth control pills.

Situation 3

Pam is 16 and Dave is 18 years old. They are both active, popular students, involved in a wide range of school activities. They have been dating each other steadily for 4 months. Their relationship is very relaxed and full of fun. Recently, they began having sexual intercourse, occurring in a variety of different places and usually unplanned. They enjoy their sexual adventuring very much. Pam uses foam and Dave sometimes also uses a condom. Pam plans to start taking the Pill. They do not consider this a permanent relationship. Dave is leaving for college in 5 months. Both have been sexually involved with one other partner prior to this relationship.

Supplement 5

VALUES CHECKLIST

SD	D	N	A	SA
strongly disapprove	disapprove	neutral	approve	strongly approve

Your Own Children or Your Best Friend

	11 year old		13 year old		15 year old		17 year old	
	girl	boy	girl	boy	girl	boy	girl	boy
nudity at home								
exploring own body								
masturbation								
opposite sex holding hands								
coed parties								
kissing games								
kissing								
unchaperoned parties								
dating								
going steady								
petting								
sexual intercourse								
birth control								
virginity								
abortion								

Supplement 6

FOR PARENTS: HOW WOULD I FEEL IF...?

For each situation, write down three feelings you would have.

How would I feel if:

		A	B	C
1.	My child failed a grade in school?	_____	_____	_____
2.	I saw my son and another boy having a masturbation contest?	_____	_____	_____
3.	I found my neighbor's 7-year-old child masturbating?	_____	_____	_____
4.	My child was rejected by the kids in her/his class?	_____	_____	_____
5.	My teenage daughter told me she was sexually active and wanted me to get her some birth control?	_____	_____	_____
6.	I just found out the guy who had been the football captain at my child's high school was a homosexual?	_____	_____	_____
7.	My spouse was very sexually attracted to someone and wanted to talk to me about it?	_____	_____	_____
8.	My teenage son was about to become a father?	_____	_____	_____
9.	My daughter wanted to try out for the soccer team?	_____	_____	_____
10.	My 16-year-old son told me that he was sexually active and wanted me to get him some condoms?	_____	_____	_____
11.	My son wanted to date a girl of another race?	_____	_____	_____
12.	My 15-year-old daughter wanted to attend an overnight co-ed party?	_____	_____	_____

Supplement 7

FOR ADOLESCENTS: HOW WOULD I FEEL IF...?

For each situation, write down three feelings you would have.

How would I feel if:

		A	B	C
1.	I failed a grade in school?	_____	_____	_____
2.	I saw my friends having a masturbation contest?	_____	_____	_____
3.	I found my neighbor's 7-year-old brother masturbating?	_____	_____	_____
4.	I was rejected by the kids in my class?	_____	_____	_____
5.	I told my mother that I was sexually active and wanted her to help me get birth control?	_____	_____	_____
6.	I just found out the guy who is the football captain at my school is a homosexual?	_____	_____	_____
7.	My parent was sexually attracted to someone and wanted to talk to me about it?	_____	_____	_____
8.	My teenage brother was about to become a father?	_____	_____	_____
9.	My sister wanted to try out for the soccer team?	_____	_____	_____
10.	My younger brother told me that he was sexually active and wanted me to get him some condoms?	_____	_____	_____

Supplement 8

FEELING WORDS

amused
angry
annoyed
anxious
appreciative
ashamed
astonished
bored
calm
cheerful
contented
critical
delighted
depressed
disappointed
discouraged
disgusted
dissatisfied
eager
embarrassed
encouraged
envious
excited
frustrated
gloomy
grumpy
guilty
happy
hateful
indifferent
interested
irritated
jealous
loving
miserable
outraged
pleased
proud
relaxed
restless
sad
satisfied
scared
silly
supportive
surprised
tense
terrified
tired
vindictive
worried

Supplement 9

JUST IMAGINE

Imagine having been a little boy in a land where the books had stories of girls doing exciting things, while the boys watched or cried or needed help. When you watched TV, you saw a female Captain Marvel, a female Captain Kangaroo, and a female superheroine. By the age of 4, according to a Harvard study, you probably wanted to be a girl.

Your mother went to work everyday and you were with your father all day. His day was oriented around the time when your mother came home from work all tired. You got the impression that your mother was more important to your family than your father.

You were allowed to play active games, but not as much as your sister, and people smiled indulgently and called you a "tomgirl" and said it was a phase you would outgrow. Your father talked to you about the time when you would be grown up and be a "daddy" just like him and your mother told your sister about how she would grow up and have a "profession" just like she has.

When you went to high school, your counselor steered you toward a secretarial course, or if you went to college into nursing, education, or social work, the three men's professions, or something else that would fit in with caring for your future family. If you were interested in mathematics or science, you were made to feel abnormal and discouraged from entering a female profession.

You always had trouble when applying for a job. You were told you would just get married and quit to take care of your home and your wife, or that you would quit when you started a family. If you protested that you would not quit working because of children, they made you feel guilty by saying children suffer if they don't have a constant one-to-one relationship with their fathers in the early formative years. You were told that you were a risk because males are absent more than women, they have male troubles, are more prone to ulcers and heart attacks, and are sick more often. They made sure you could type before they hired you and paid you less than your female colleagues who did the same work. You began to dislike your job and got married to escape the world of work.

Upon marriage, you changed your last name to your wife's last name so that everyone would know you were taken. You started your family and stopped working. For some reason, however, you began to feel tied down and unfulfilled, so you joined a men's club as an outlet for your creative energies. It didn't work. You felt unhappy, as if you were not all there, not all you could be. You were vaguely dissatisfied. Feeling restless and bored, you told yourself you should be happy. You read your men's magazines to find an answer; they suggested needlepoint.

You went to talk to a counselor. She very subtly urged you to accept your male role and suggested ways of being more masculine, which would satisfy your wife better and, therefore, make you happier. You went to a psychiatrist. She told you more of the same thing, but it cost you more money.

You began to talk to the other men in your men's club. They, too, were dissatisfied and had had the same experiences. You decided to use your group meetings to find ways to improve your lives. You called your wives in to help in this process because it seemed so natural to have female leadership.

Supplement 10

ANSWER SHEET

___ 1. adventurous
___ 2. aggressive
___ 3. big
___ 4. boss
___ 5. brave
___ 6. breadwinner
___ 7. clumsy
___ 8. cute
___ 9. dainty
___ 10. domineering
___ 11. dumb
___ 12. emotional
___ 13. foxy
___ 14. gentle
___ 15. giggly
___ 16. gossip
___ 17. graceful
___ 18. hairy
___ 19. hard
___ 20. helpless
___ 21. hero
___ 22. independent
___ 23. innocent
___ 24. loud
___ 25. nagging
___ 26. quiet
___ 27. sensitive
___ 28. sexy
___ 29. soft
___ 30. strong
___ 31. sweet
___ 32. talkative
___ 33. tender
___ 34. tough
___ 35. wicked

(Source: Abbey Harris, N., and K.R. Todd, Saying Goodbye to the Birds and the Bees.)

Supplement 11

GENDER ROLE ASSESSMENT

This inventory presents 39 personality characteristics. Using a scale from 1 to 5, rate each characteristic according to how true it is of you:

1	2	3	4	5
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	USUALLY TRUE	ALWAYS TRUE

___ Worldly[a]
___ Submissive[b]
___ Defends own beliefs[a]
___ Independent[a]
___ Shy[b]
___ Athletic[a]
___ Affectionate[b]
___ Assertive[a]
___ Nurturant[b]
___ Strong personality[a]
___ Loyal[b]
___ Forceful[a]
___ Feminine[b]
___ Analytical[a]
___ Sympathetic[b]
___ Has leadership ability[a]
___ Sensitive to the needs of others[b]
___ Adventurous[a]
___ Understanding[b]
___ Makes decisions easily[a]
___ Compassionate[b]
___ Self-sufficient[a]
___ Eager to soothe hurt feelings[b]
___ Dominant[a]
___ Timid[b]
___ Rough[a]
___ Warm[b]
___ Outgoing[a]
___ Tender[b]
___ Aggressive[a]
___ Conforming[b]
___ Acts as a leader[a]
___ Childlike[b]
___ Individualistic[a]
___ Does not use harsh language[b]
___ Competitive[a]
___ Loves children[b]
___ Ambitious[a]
___ Gentle[b]

NOTE: See page 106 for explanation of "a's" and "b's."

Unit V

COMMUNICATION SKILLS

OVERALL GOAL:

To help participants develop basic communication skills for discussing sexuality, solving problems, and managing conflicts.

RATIONALE:

In many families topics and questions related to sexuality are rarely mentioned. Families are busy, the subject doesn't come up, maybe someone feels awkward -- no one quite knows how or when to begin. Parents and adolescents may have opposing feelings, each feeling the other can't or won't understand. Feelings may be strong, arguments heated, and conflicts unending and hurtful.

This unit offers practical suggestions and guidelines to use when communicating about sexuality, an opportunity to rehearse these in a supportive atmosphere, and specific guidelines for solving problems and negotiating strong differences.

BEHAVIORAL OBJECTIVES:

1. To examine participants' own listening skills. (Activities V.1-4, 10, and 11)

2. To learn and practice some methods of effective communication. (Activities V.3, 5, 6, and 8-17)

3. To identify situations which require skillful communication. (Activities V.7 and 9)

4. To practice incorporating information about sexuality into everyday conversation. (Activity V.15)

5. To practice responding to questions about sexuality when parents don't know the answer or are embarrassed; to practice asking questions when adolescents are uncomfortable. (Activities V.14 and 15)

6. To identify sexual terminology that families can use when discussing sexuality. (Activities V.18 and 19)

7. To learn and practice ways to solve problems among family members. (Activities V.7-9, 16, 17, and 20-24)

8. To consider the impact the course has had on participants. (Activity V.25)

APPROACH TO TEACHING COMMUNICATION SKILLS

One third of this curriculum is devoted to developing parent/child communication skills. A teacher can (1) teach basic communication skills and help participants think about how to apply them; and/or (2) have participants practice responding to specific sexuality related questions or situations thereby strengthening their communication skills. Which approach is used depends on the needs of the families as well as on the teacher's style.

Method 1: Experts have identified specific behaviors that facilitate communication. These include "reflective listening," "I-Messages," and problem-solving techniques. This approach is especially successful with people who enjoy structured exercises or who enjoy learning "formulas" for new behaviors.

Some facilitators who choose this approach to teaching communication skills will begin the process in an earlier session. For example, reflective listening and "I-Messages" can be introduced early in the course and practiced briefly in every subsequent session. It is nearly impossible to thoroughly acquaint participants with these methods in one session.

Some educators report that many parents are uncomfortable participating in these structured activities with their children. Rather than make parents anxious, these educators suggest modeling the techniques. You can teach "I-Messages" by continually encouraging participants to contribute what they feel; you can demonstrate reflective listening throughout the course in the way you respond to participants' concerns.

Method 2: Some parents find the first approach too "gimmicky," artificial, or difficult to grasp; for others, the systematic, right or wrong way of communicating is too threatening. Another method of teaching communication skills is to have parents practice answering specific sexual questions and responding to specific situations. This approach, which relies on the good sense of the group for feedback, is recommended for parents who are currently experiencing communication difficulties at home. Again, this is only a recommendation and is not meant to suggest that this method would not work well with other families.

Some facilitators combine the two approaches. Regardless of the basic method that is chosen, it is important for parents and children to examine their listening skills and to practice raising and answering sexual questions.

We recommend spending the first session on developing communication skills, the second on problem solving.

UNIT V OVERVIEW

Name of Activity	Estimated Minutes	Type of Activity	Materials Required	Age of Children	Page No.
1 Introduction	5-10	Presentation	None	11-18	132
2 How Well Do You Listen?	10	Exercise	None	11-18	133
3 Listening	20	Exercise	3x5 Cards	11-18	134
4 The Rumor Game	15	Exercise	None	11-18	135
5 Communication	20-30	Presentation	Supplement 1	13-18	136
6 Communication Tools	15-25	Presentation	None	13-18	138
7 Whose Problem Is It?	15-20	Exercise	None	13-18	140
8 Reflective Listening	20-30	Exercise	Supplement 2	13-18	142
9 "I-Messages"	20-30	Exercise	Supplement 3	13-18	143
10 Body Language	15-30	Exercise	Index Cards	11-18	144
11 Charades	20-35	Exercise	None	11-18	145
12 Touching Continuum	20-30	Exercise	Supplement 4	13-18	146
13 Guidelines	15	Discussion	Supplements 5&6	13-18	147
14 Commonly Asked Questions	30-60	Exercise	3x5 Cards, Supplements 7&8	11-18	148
15 Beginning Conversations About Sexuality	20-35	Exercise	None	13-18	149
16 Film: Parent-Child Communication	35-50	Film	Projector	12-18	150
17 Film: It's Up to Laurie	45	Film	Projector	15-18	151
18 Vocabulary	20-30	Exercise	Supplements 9&10	13-18	152
19 Terminology	20-35	Exercise	Newsprint	16-18	153
20 Problem Solving	15-20	Presentation	Supplements 11&12	13-18	155
21 Negotiation Skills	20-30	Exercise	Supplements 12&13	13-18	158
22 Filmstrip: Parent-Child Negotiation	30-50	Film	Projector	11-18	159
23 Values Collision	20-30	Exercise	Paper	11-18	160
24 Problem-Solving Exercise	45-60	Exercise	Supplement 14	13-18	162
25 Closure and Final Summary	20-30	Discussion	None	11-18	163

INTRODUCTION (V.1)

Purpose:

To introduce the sessions on communicating about sexuality within the family.

Materials: None

Time: 5-10 minutes

Procedure:

Begin the session by saying something like this: "In the last session, you looked at your own attitudes about a variety of sexual topics and identified some specific values that you would like to discuss. Now I want you to think about what you actually want to say to each other: What words will you use? How will you feel using them? How can you begin conversations? How will you ask and answer questions? One large part of what we will do is to practice the following skills for effective communication."

1) The ability to listen to, attend to, and empathize with each other's emotions and values.

2) The ability to communicate clear statements of your own values and emotions.

3) The ability to ask for and to provide information about sexuality.

4) The ability to problem solve and negotiate when parent and child have a problem or are in conflict over either a behavior or an attitude.

HOW WELL DO YOU LISTEN? (V.2)

Purpose: Warmup activity to help participants look at their own listening skills.

Materials: None

Time: 10 minutes

Procedure:

Begin the session by telling the group about a minor problem that you are having in your life. Talk for less than 1 minute. Now ask for a volunteer to rephrase or summarize what you have just said. After one participant summarizes, ask what, if anything, was omitted. Fill in any omissions and ask the group to evaluate themselves on their listening skills.

Discussion Points:

1. How many people heard all of the details of the problem?

2. How many recognized the feelings that were being expressed during your talk?

LISTENING (V.3)

Purpose:

Warmup activity to alert participants to some barriers to effective communication.

Materials: 3x5 cards

Time: 20 minutes

Procedure:

Give each person a 3x5 card with questions listed. Read the questions aloud. Ask the parents to answer, based on their lives at ages 13-15. Adolescents should respond based on their lives right now. Choose the sample questions that are most appropriate for your group or create your own questions.

Examples:

(1) Who was (is) home when you came(come) home from school? What did (do) you do?
(2) What was (is) your favorite thing to do in your spare time?
(3) What were (are) your friends like? Did (do) your parents like them?
(4) How well did (does) your family communicate?
(5) Did (does) your family take vacations together? If so, describe the most exciting one.
(6) Did (do) you have any career plans?
(7) Was (is) a car available for you to drive? Were (are) there any restrictions?

Divide the class into pairs and ask each pair to pick a question and to decide who will be the first listener and who will be the first speaker. Instruct the listener to look into the speaker's eyes and not to speak; the two should sit face-to-face, comfortably. Have participants repeat this exercise with the listener and speaker switching roles.

Now ask participants to pick a different question. This time have the listener look away from the speaker's eyes. Then have them switch roles.

Repeat the same task with partners standing back to back.

Again, repeat the task with one member standing up, the other siting down.

Reconvene the group to discuss the exercise.

Discussion Points:

1. How did you feel in the various situations?

2. How did your physical position affect your ability to listen and to understand?

THE RUMOR GAME (V.4)

Purpose: To examine the listening skills of individuals in the group.

Materials: None

Time: 15 minutes

Procedure:

Divide the group into two sections. Tell them that they are going to experience an activity that will explore their listening skills. Have each group line up. Call the first person in each line up front to listen to a message. Then have each of them call the second person in their line up front to listen to the message. The second person then repeats the message to the third person and so on.

The message is:

> Puberty is the beginning of the stage of growth called adolescence. Everyone goes through puberty! Different bodies grow at different rates, so one person may start at age 9 while another may not start until age 16.

When the last person in each group has been told the message, have them repeat it to the entire group. Compare this message with the one that was originally given. Discuss how the message changed during the activity.

Discussion Points:

1. How did the communication break down?
2. Does that kind of breakdown occur in other situations?
3. Did anyone notice that he or she didn't have the facts straight?

COMMUNICATION (V.5)

Purpose: To give participants guidelines for effective communication.

Materials: "List of Don'ts" (Supplement 1)

Time: 20-30 minutes

Procedure:

When discussing feelings and concerns, parents and adolescents behave in a number of ways that hinder communication. Ask parents to think of ways they or other parents might hinder communication. Discuss the points listed below, assuring parents that they may not be guilty of any of these styles, but to note if they hear a description of themselves. Also tell them that not only do parents use these styles, but bosses, siblings, and spouses may use them as well. As you go through the list, give an example of each. After the descriptions are finished, ask them which styles are hard to avoid.

Parents hinder communication when they:

(1) Spend too much time questioning, diagnosing, or analyzing.

(2) Use orders, commands, and threats to maintain control.

(3) Insist that the child have only so called "proper" feelings; use the words "should" and "shouldn't" often.

(4) Rely on ridicule, name-calling, sarcasm, or jokes to control the child.

(5) Lecture and advise a child based on their "adult superiority" and years of experience -- "When I was your age ..."

(6) Treat a child's feelings too lightly by giving simple reassurance to show that all is well when it really isn't.

(7) Blame the child before getting all the facts.

(8) "Solve" the problem for the child.

(9) Insist that the child be happy because it hurts the parents so much to see him/her unhappy.

Now ask adolescents to think of ways that they might hinder communication. Discuss the points listed below, giving examples of each.

Children hinder communication when they:

(1) Jump to the conclusion that parents don't understand.

(2) Intentionally say shocking things.

(3) Insist that parents don't know what they're talking about.

(4) Use sarcasm or jokes to "get" parents.

(5) Imagine that parents have no feelings and only want to control.

We can all facilitate communication when we:

(1) Avoid the above automatic roles.

(2) Maintain eye contact.

(3) Avoid giving advice when the other needs a sympathetic listener.

(4) Avoid thinking of our reply while the other person is still talking.

(5) Avoid jumping to conclusions.

(6) Pay attention to what the other person is saying.

(7) Avoid interrupting.

(8) Avoid insisting the family has to talk to fill up every silence.

(9) Use other responses such as nodding, saying "uh-huh" or "go on," and looking attentive and interested to show that we are listening and to encourage the other to continue.

Distribute Supplement 1.

Discussion Points:

1. Can you think of situations in which you hindered communication? Facilitated communication? What are some examples?

COMMUNICATION TOOLS (V.6)

Purpose:

To introduce participants to some concrete tools to improve communication.

Materials: None

Time: 15-25 minutes

Planning Note:

These techniques are useful for breaking old patterns of communication, for times that others have strong feelings about something or have a definite problem. They are not tools to use all of the time and may not fit a particular family's style. Some family members become discouraged and feel that they have failed when reflective listening and "I-Messages" are not successful in their home.

For further reading, see Gordon, T. Parent Effectiveness Training, and Dinkmeyer, D. and G. McKay. Parent's Handbook. (See Appendix B.)

Procedure:

Before the session, ask one of the participants or your cofacilitator to be ready to tell you about a minor problem. Model reflective listening. Each time, ask the person with the problem how s/he felt. Did s/he feel "listened to" and understood? Encouraged to continue? Repeat this process until the group grasps the point.

Reflective Listening

Explain that reflective listening is a technique which involves recognizing the feelings behind what another person is saying, then summarizing and feeding back what the person is saying. A person who is upset often loses perspective.

Listening reflectively:

1) Encourages the person to think through and resolve his/her own problem or concern.

2) Demonstrates very clearly that you are listening and interested.

3) Gives the person an opportunity to correct you if you have misunderstood something.

"I-Messages"

An "I-Message" is a tool that family members can use to clearly communicate their feelings to each other. It is a calm statement describing your reaction to a particular behavior. "I-Messages" can be either positive or negative. A "You-Message" lays blame and conveys criticism. An "I-Message" is constructed in the following manner:

(1) In a nonblameful manner, describe the behavior:
- When dirty clothes are left on the floor in your room ...

(2) State your feeling:
- I feel resentful ...

(3) State how the behavior causes a problem for you:
- It makes extra work for me ...

(4) State what you want:
- I want you to pick up your clothes after you take them off ...

"I-Message": When dirty clothes are left on the floor in your room, I feel resentful because it makes extra work for me and takes away my time for fun and relaxation. So I want you to pick up your clothes after you take them off. OR: I resent your leaving dirty clothes on the floor and under the bed because it makes extra work for me and takes away my time for fun and relaxation.

Note -- The word "you" in a description of behavior does not make it blameful.

Give another example of an "I-Message" such as "When you use profanity, I feel disgusted because those words seem violent and offensive to me. If an "I-Message" is made in an angry or critical tone, it becomes a "You-Message." "I-Messages" are effective only when the relationship is positive enough for each person to be concerned about the other's well-being.

Discussion Points:

1. Can you imagine using these techniques? Why or why not?

2. In what circumstances would reflective listening be helpful? "I-Messages"?

3. When would they be inappropriate?

WHOSE PROBLEM IS IT? (V.7)

Purpose:

To help participants identify behaviors that cause problems for themselves or for other family members. To identify problem situations and explore ways of handling them.

Materials: None

Time: 15-20 minutes

Procedure:

Explain that in parent-child relationships, different kinds of problems arise. Sometimes children behave in a manner that is unacceptable to parents. In those situations, it is the parent's problem. Other times the child has a problem that doesn't affect the parent. On other occasions no problem exists. Present the following model, giving an example of each point. (Source: Gordon, T. P.E.T., and Dinkmeyer, D. and G. McKay. Parents' Handbook. See Appendix B.)

CHILD OWNS PROBLEM	The child has a problem because he is thwarted in satisfying a need. It's not the parents' problem because the child's behavior in no way interferes with them. Therefore, it is the child's problem.	Skills for helping child help himself: Reflective listening Brainstorming solutions Encouragement
NO PROBLEM AREA	The child is satisfying her own needs - she is not thwarted - and her behavior is not interfering with the parents. Therefore, there is no problem in the relationship.	Skills and concepts for enhancing the relationship when no problems exist: Initiating conversations Sharing ideas and feelings
PARENT OWNS PROBLEM	The child is satisfying his own needs - he is not thwarted. But his behavior is a problem to the parents because it is interfering with them. Now it is the parents' problem.	Skills for clearing up situations where child's behavior is a problem for parent: "I-Messages" Problem-solving

Read the following situations. Ask participants to decide whose problem it is and what steps should be taken to deal with the problem.

Examples:

1. Sixteen-year-old Sandy is unhappy when no one asks her to the prom.
2. John feels left out because he didn't make the school band.
3. Fifteen-year-old Sam is smoking marijuana.

4. June does not obey curfews.

5. Thirteen-year-old Pat doesn't like his/her looks.

6. Mike asks his parents what they think about premarital sex.

7. Carla who is 15 has arranged a date with a 22-year-old man.

8. Dwight no longer wants to accompany the family to religious services.

9. Chris receives failing marks in three subjects.

10. Joanie asks her parents to attend a parent seminar at school.

Discussion Points:

1. For parents: Can you think of a problem that your adolescent had recently? How did you deal with it?

2. For parents: What problems have you had with your adolescent's behavior recently? How did you deal with that?

3. For adolescents: What problem have you had recently in your family? Whose problem was it?

4. For adolescents: How would you handle the problem differently if it was your parents' problem? Your problem?

REFLECTIVE LISTENING (V.8)

Purpose:

To practice reflective listening. To help participants recognize responses that break down open communication within families.

Materials: "Statements" (Supplement 2)

Time: 20-30 minutes

Procedure:

Distribute Supplement 2. Play the role of an adolescent or parent and have participants give a reflective listening response. Read one statement at a time with feeling. Have people take turns responding.

Discussion Points:

1. Which responses seemed particularly appropriate?

2. How comfortable are you with reflective listening?

3. Would you use this technique in your family or with friends? When?

"I-MESSAGES" (V.9)

Purpose: To allow participants to practice sending "I-Messages."

Materials: "I-Message Practice" (Supplement 3)

Time: 20-30 minutes

Procedure:

Distribute the handouts. Ask participants to write their own "I-Messages" in the space provided; one positive and one negative. Stress that in real life situations this model should be translated into their own speaking style.

When they have completed two "I-Messages," ask participants to find partners and to read what they have written to each other. This will help reinforce the concepts and allow them to practice saying and hearing "I-Messages." Then ask for volunteers to share their "I-Messages" with the whole group.

Discussion Points:

1. Ask participants to use "I-Messages" during the remaining sessions and at home.

2. Stress that "I-Messages" are not intended to solve problems or to find solutions. They are used to express emotion or feeling as clearly as possible so that another person can better understand how his/her behavior is affecting you. Once the other person understands, then both can start discussing solutions or behavior changes.

BODY LANGUAGE (V.10)

Purpose: To alert participants to the nonverbal ways they communicate.

Materials: Index cards, each describing a situation

Time: 15-30 minutes

Procedure:

Ask for a parent volunteer to play an adolescent while you play parent. Give the volunteer the index card and while s/he talks, you respond with facial expressions and body movements to convey your feelings.

For example:

> Adolescent: Tell your parent how upset the principal and teachers are about hall behavior. You and your friends think the adults are making a big deal out of nothing.

Now ask for an adolescent to volunteer to play the role of a parent while you (as the adolescent) respond with body language:

> Parent: Tell your child how much you like her/his new friend. Ask how her/his date was last night.

Have other participants volunteer if time permits.

Discussion Points:

1. What nonverbal message did the parent perceive? Was this the message that was being sent?

2. What nonverbal message did the adolescent perceive? Was this the message that was being sent by the parent?

3. Sometimes people say one thing with words and another with their bodies. What impact does this have on the child? The parent?

CHARADES (V.11)

Purpose: To increase participants' awareness of how they communicate nonverbally.

Materials: None

Time: 20-35 minutes

Planning Note:

Use this exercise only if: (1) there is already rapport in the group, (2) people are willing to participate in light activities, and (3) you are comfortable leading the charades.

Procedure:

Demonstrate nonverbal communication:

1. Sit with your legs tightly crossed and wring your hands (nervous and closed).

2. Sit motionless, no facial expression, and look off into the distance (depressed). Continue to give examples until the class appears comfortable.

Ask volunteers to demonstrate feelings -- anger, fear, excitement, disappointment, interest, sarcasm, impatience -- and ask parents to guess what the volunteer is communicating.

Discussion Points:

1. Do you ever try to hide feelings? Does it work?

2. What feelings do your children see most often?

3. What feelings do your parents see most often?

4. What feelings do your children see least often?

5. What feelings do your parents see least often?

6. How do you show love to your children or parents?

TOUCHING CONTINUUM (V.12)

Purpose:

To help participants recognize the amount of touching in their families and to determine their feelings about touching.

Materials: "Touching Continuum" (Supplement 4)

Time: 20-30 minutes

Procedure:

Distribute supplements to participants. Ask them to complete the forms as honestly as possible. If you prefer, identify points in the room for the continuum and have participants stand where their answers would be. While potentially threatening, this can be quite effective to demonstrate the range of experience.

Discussion Points:

1. For parents: Is there a difference between the amount of touching in your current family and the amount of touching in the family that you grew up in?

2. How do you feel about the amount of touching that you give?

3. How do you feel about the amount of touching that you receive?

4. What, if any, changes would you like to make in the touching behavior in your family?

5. For adolescents: Is there a difference between the amount of touching in your family today and the amount of touching 5 years ago?

6. In what ways would you like your parents to touch you?

GUIDELINES (V.13)

Purpose: To supply basic guidelines for facilitating communication in families.

Materials:

"Guidelines" (Supplement 5 for parents, Supplement 6 for teenagers).

Time: 15 minutes

Procedure:

Distribute guidelines. Ask participants to review them and discuss.

Discussion Points:

1. Which suggestions do you already practice?
2. Which suggestions seem most difficult?
3. Are there any problems following these guidelines in families with more than one child?

COMMONLY ASKED QUESTIONS (V.14)

Purpose:

To practice answering specific questions and to share possible approaches to difficult questions. To give teenagers experience in asking their parents questions.

Materials:

3x5 cards with questions (Supplement 7 for groups with early puberty children, Supplement 8 for groups with adolescents).

Time: 30-60 minutes

Procedure:

Begin this session with a statement like this: "A second part of communication about sexuality is simply asking and answering questions." Discuss the old saying, "You had better not tell adolescents too much." Ask if we use that approach about any other topic.

Have each parent pair off with a teenager. Family members can choose to be together or not. Distribute questions and instruct teenagers to ask parents the questions. After each parent answers, the teenager should give some feedback about the answer. When all of the questions have been discussed, have participants return to the large group to talk about how they felt in each role.

Discussion Points:

1. For parents: Did any of the questions embarrass you? What ways can you think of to handle embarrassing questions?

2. For parents: Were there any questions you were not sure of the answer? What would you do in that situation?

3. For adolescents: How did you feel asking questions? What did you think of the answers you were given?

4. For adolescents: Why is it difficult for young people to ask their parents questions?

5. For adolescents: Review the purpose and summarize major points of the large group's discussion. Summarize once more reflective listening, "I-Messages," and giving information.

BEGINNING CONVERSATIONS ABOUT SEXUALITY (V.15)

Purpose:

To help parents and adolescents think about when and how to begin conversations about sexuality.

Materials: None

Time: 20-35 minutes

Procedure:

Separate parents and adolescents. Have them divide into small groups. Ask each group to brainstorm situations that occur regularly in their individual homes -- appropriate occasions to bring up a sexual topic with their child or parent. Ask participants to describe in detail how they would begin each conversation. Have one person in each group volunteer to record each suggestion that comes up. Bring participants back to the large group and have recorders list the situations their groups suggested.

Discussion Points:

1. How did you feel about these ideas?

2. How realistic are they?

3. How many people feel they could really implement these suggestions at home?

FILM: PARENT-CHILD COMMUNICATION (V.16)

Purpose:

To explore communication difficulties between parents and teenagers.

Materials:

16mm projector and film:
"It's My Decision As Long As It's What You Want" [McGraw Hill]

Time: 35-50 minutes

Planning Note:

Appendix A provides a brief description of each film to help you decide which would be most useful for your class.

Procedure:

Introduce film. Ask participants to pay attention to positive and negative characteristics of the communication displayed in this film. Discuss the characteristics they observe.

Discussion Points:

1. What was the mother's style of communication? How could she improve?
2. What was the daughter's style of communication? How could she improve?
3. How can the conflict be resolved?
4. Have parents and teenagers role play the situation demonstrating more effective communication.

FILM: IT'S UP TO LAURIE (V.17)

Purpose:

To explore the influence of different styles of parent/child communication on teenage sexual decision-making.

Materials:

16mm projector and film:
"It's Up To Laurie" [Centron Films]

Time: 45 minutes

Procedure:

Introduce film. Ask participants to watch the three styles of parent/child interaction and compare them with the style in their own family. Stress that a certain style of communication does not guarantee that teenagers will behave in a specific way.

Discussion Points:

1. Which communication style seemed most useful?

2. Which style seemed least useful?

3. How did these styles compare with the communication patterns in your family?

VOCABULARY (V.18)

Purpose:

To discuss sexual vocabulary and decide which words to use within the family.

Materials:

"Sexual Vocabulary" (Supplement 9), "Glossary of Sexual Terms" (Supplement 10).

Time: 20-30 minutes

Planning Note:

Some teachers find activities such as this unnecessary. Instead, they model correct vocabulary and integrate discussions of vocabulary throughout the course. Whether or not you deal with the issue separately depends on the needs of the group.

Procedure:

Provide all participants with the "Sexual Vocabulary" list and "Glossary of Sexual Terms." Ask them to think about each word and to provide an appropriate substitute wherever they wish. Then ask parents to identify which words they would use with their partner and which words they would use with their children. Ask teenagers to identify which words they would use with their parents and which they would use with their friends. If this is not the last class, integrate the lists and hand them out next class. Sharing the differences and similarities can be entertaining. If participants want to practice saying the words, ask them to take turns reading the integrated list.

Discussion Points:

1. Did you have any difficulty finding words you felt comfortable using? In what situations?

2. For parents: What discrepancy did you discover between words you would use with your partner and words you would use with your children?

3. For adolescents: Where did you find a discrepancy between words you would use with your parents and words you would use with friends?

4. Can parents and adolescents find a vocabulary with which they are both comfortable?

TERMINOLOGY (V.19)

Purpose:

To help participants think about how they react to various sexual words and to decide what words to use with each other.

Materials:

A newsprint sheet describing the four languages of sexuality. Newsprint for brainstorming with one sexual term on top of each sheet. Magic markers.

Time: 20-35 minutes

Procedure:

Introduce this exercise by displaying the following headings on newsprint. Point out the various types of language we use to talk about sexuality. Be careful not to take a position about what is "correct." Acknowledge that some families are more comfortable with indirect language.

- Scientific language: urinate
- Childhood language: pee pee
- Street language: piss, screw
- Indirect language: have to go to the bathroom, sleep together

Divide the large group into smaller groups, giving each group a newsprint sheet with one term on it and a magic marker. Ask participants to think of synonyms for the scientific terms penis, vagina, intercourse, menstruation, testicles, and breasts. (Of these words, penis, menstruation, and breasts tend to be the least threatening.) Tell the group to choose a recorder and to develop a list. When they are finished, post the sheets and discuss the results.

Discussion Points:

1. Which words are most accurate?
2. Which words do we use with the most emotion?
3. Did you notice many sexual terms being used as a put-down, a weapon, or something done "to" rather than "with" someone?
4. Which words are the most ambiguous and misleading?
5. With which words are parents most comfortable? Teenagers?
6. Did parents and teenagers find words with which they are both comfortable?

7. Summarize comments and emphasize that some words have hidden meanings or are confusing. Stress that sometimes adolescents use street language, not to shock, but because they know no other language. Make it clear that you are not condoning any particular type of communication.

PROBLEM SOLVING (V.20)

Purpose: To offer participants one method of problem solving.

Materials:

"Factors in Procedure Setting" (Supplement 11) and "Negotiation Skills" (Supplement 12).

Time: 15-20 minutes

Procedure:

Present the following information: Active listening and "I-Messages" can prevent and solve many problems. Reflective listening works especially well when the other person has the problem. "I-Messages" are particularly effective when the other is unaware that her/his behavior is causing a problem for you.

Nevertheless, problems that don't fit these two categories may continue to crop up. In order to work cooperatively on old or new issues, it can help to agree how these issues will be resolved. While the parent has final authority over the child, pulling rank to solve problems often causes resentment. In addition, adolescents dislike being ordered around.

Procedure Setting: One technique which some people use to facilitate solving problems is procedure setting. With this method, families agree to set procedures for negotiation and to follow them. Distribute Supplement 11 and discuss each step.

People who follow predictable procedures during conflict have a good chance of being satisfied with the outcome. Sometimes, however, the procedure breaks down because someone uses a sarcastic tone of voice, gets angry, yells, threatens negative consequences, or withdraws. In that event, the session should not end until both parties agree to try again at a mutually agreed upon time. Regardless of who breaks the procedure, the parent's authority still stands.

Negotiating: Distribute the guidelines for negotiation, Supplement 12, and discuss each guideline. Point out that some problems may not be resolved, and some may solve themselves in 6 months. The point of negotiating is to speed up that process, and demonstrate sensitive, humane methods of managing conflict.

Values Collision: Parents generally want their children to adopt their own values. This may be for their child's benefit or for a validation of the parents' values. By and large, children do adopt most of their parents' values. Children watch their parents closely. They observe the way the parent holds a fork and the way the parent forms opinions. Through such "modeling," parents exert a strong influence.

However, when the child encounters problems and opportunities in life for which the parents have provided no modeling, the child will need to reach for other sources of values. In addition, children grow up in an environment that differs from their parents' and may, therefore, reach different conclusions to the same question.

When the parent experiences the child's new or different values (in verbal and nonverbal forms), he or she will find some acceptable and others unacceptable. The parent then has a problem of how to deal with those new values that are unacceptable.

A now classic example of a behavior that is unacceptable to parents is the teenage son wearing his hair long. The parents value a clean-cut, short-haired look, associating long hair with an irresponsible lifestyle that they feel will be bad for their son. They are upset and want the son to change this behavior and adopt their beliefs (values). On the other hand, the son believes that long hair will make him more acceptable to his friends and more attractive to girls, so his value for long hair is very strong. And while he doesn't want to cause his parents pain, he can see no tangible effect of his long hair on them. His own strong value and the lack of tangible effects on his parents override his concern for his parents' feelings and leave him unmotivated to change.

Situations like these are called "values collisions" and unlike other conflicts, their resolution does not lie in tapping the child's motivation to change in order to help the parents. The child's motivation to change must be internal, that is, to help him/herself.

Because of the intensity of the parents' feelings about their values, the temptation to use power (force, punishment, etc.) in "values collisions" is great. Because of the intensity of the child's feelings about his or her values, however, power almost never works. In addition, the normal resentment of the parents' use of power is greatly increased in "values collisions," because the child sees an insufficient tangible effect on the parents to justify their meddling into the child's personal life.

Consider the following alternatives to power in values collisions:

> Modeling: If your child can see that your life is full, there is a high probability that your child will copy your values at some point.
>
> Consulting: If your relationship is good, your child may consult you about a particular value.
>
> Modifying Self: After getting information about your child's value and considering it with an open mind, you may decide to adopt a new value for your own lifestyle.

Not all children's values will fit their parents' values and these parents may not be able to do anything to change it. Parents need to accept this fact and recognize that it is not a statement of their importance to their child or their skill at parenting, but rather an expression of the individuality of their child.

Discussion Points:

1. Can you think of a conflict situation you might resolve using procedure setting and negotiation methods?

2. Have you found yourself in any values collisions with your teenager? With your parent?

3. How can you distinguish between a conflict which must be resolved and a values collision?

NEGOTIATION SKILLS (V.21)

Purpose: To practice negotiating family conflict.

Materials:

"Negotiation Skills" (Supplement 12) or "What Teenagers Want From Parents" (Supplement 13).

Time: 20-30 minutes

Procedure:

Begin by reviewing Supplement 12. To facilitate participants' learning, a poster can be made depicting the same information. Ask parents to think of a conflict they would like to negotiate with their teenager and vice versa. Encourage them to pick a sexual issue, but don't insist. It may be too difficult. Ask parents and teenagers to choose partners from different families. First, parents will be themselves and the teenagers will role play the children. Give the parents a few minutes to give their partners some background on the conflict and then give them 10 minutes to practice negotiating. Tell them the key is tempo. Keep it slow!

When you cut them off, ask the parents to tell how they think they did. Ask for questions.

Now ask the teenagers to give the parents some background on their conflict and give them 10 minutes to practice negotiating. Again ask for questions.

Ask participants to take a few minutes to go over their notes and to pull out the major things they learned in this session. Make a list on the board. Ask them to make a list and read it every day for a week.

Discussion Points:

1. How did the negotiations work out?

2. Can you use these techniques at home?

3. Distribute Supplement 13. Ask adolescents what they might add or delete.

FILMSTRIP: PARENT-CHILD NEGOTIATION (V.22)

Purpose: To present strategies for resolving conflicts.

Materials:

Projector, cassette recorder, and film or filmstrip:
"Adolescent Conflict: Parents vs. Teens, Part 1 or 2" [Media Fair, Inc.]
"Coping II: Getting What You Want" [Film Fair Communications]

Time: 30-50 minutes

Planning Note:

Appendix A provides a brief description of each film to help you decide which would be most useful for your class.

Procedure:

Introduce the filmstrip or film and show it to the group. Part One of the filmstrip focuses on the causes and manifestations of parent-child conflicts. (Part One is only somewhat useful and could be skipped.) Part Two presents the transactional analysis concepts that are useful in understanding communication and includes advice for parent-child negotiations. The film demonstrates how communication breaks down and offers a variety of suggestions for successful negotiation.

Discussion Points:

1. Was the filmstrip or film useful?

2. How might you use some of these ideas within your own family?

VALUES COLLISION (V.23)

Purpose:

To explore how to handle situations in which family members hold different values.

Materials: Paper and pens

Time: 20-30 minutes

Procedure:

Have parents think about their children's unacceptable behaviors. Have adolescents think about rules or responses to their behavior that they find irritating. If they can make the following statements about any behavior, it is probably a value collision:

a. Parents do not accept the adolescent's behavior.

b. The adolescent does not believe that the behavior causes a real problem for parents.

c. Parents believe the child has a problem.

d. The adolescent does not believe that he or she has a problem.

e. The adolescent feels parents are being unreasonable.

Based on the above criteria, have participants list on paper any values collisions that they have with each other. Examples:

1. My son's choice of friends.
2. Language my daughter uses.
3. Parents not allowing me to go out in a car on a date.
4. Parents saying bad things about marijuana while drinking three martinis.

Ask participants how they have handled such values collisions in the past.

Summarize the discussion and offer any of the following material that did not appear in the discussion. When both parents and adolescents feel strongly, using power often exacerbates the difficulty. Alternatives to power include:

1) Modeling -- demonstrating your point of view by the way you live your life; the child possibly copying in time;

2) Consulting -- being available to the child for consultation about your perspective on a particular value;

3) Modifying self -- being open enough to the other's point of view that after careful thought you adopt a new value for your own lifestyle.

Discussion Points:

1. Considering the three choices, how do you plan to influence each other in the future?

2. Mention that parents and teenagers will inevitably agree on some points and disagree on others. These areas are not necessarily permanently fixed. Disagreement is not a sign of failure in the relationship.

PROBLEM-SOLVING EXERCISE (V.24)

Purpose:

To discuss and consider ways of handling some difficult problems related to sexuality.

Materials: "Problem Situations" (Supplement 14)

Time: 45-60 minutes

Procedure:

Present some statistical background about the incidence of rape, teenage pregnancy, and child molestation. Use local statistics if possible. Convey the message that all American families are at some risk for experiencing one or more of these situations. However, any one of these problem areas can be handled and do not necessarily mean "the end of the world" for either parent or child.

Have participants form small groups. Encourage family members to work together. After giving instructions, separate each group as much as possible. Ask everyone to read through the situations carefully. Taking the situations one at a time, in any order, each group should discuss how they could handle the problems. (Watch that they do not get stuck forever on only one situation, but do not demand that they do all of them.) One person from each group should keep track of their best solution(s) for each situation.

After 30-40 minutes, call the groups back together. Take each situation in turn and have each group share their best responses. Be as generous as possible in reinforcing their answers. Your role at this point is to be a witness to their own coping skills rather than to display your own expertise. When appropriate, point out the diversity of responses that the different groups came up with. Underscore that there are many paths to good family sexuality education.

Discussion Points:

1. What was the major obstacle for handling these situations?

2. What resources in your community would assist you in handling such situations?

CLOSURE AND FINAL SUMMARY (V.25)

Purpose:

To summarize what participants have learned in the course and where they go from here. To allow participants to say goodbye to the facilitator and to other group members.

Materials: None

Time: 20-30 minutes

Procedure:

1. This is the time for personal statements about the course and anecdotes about their friends' and relatives' reactions to their taking the course.

2. Bring out the list of expectations that was created in the first session. Check to make sure every expectation has been addressed in some fashion by the course.

3. Review in a few sentences all that has been covered in the course.

4. Provide positive feedback to the group, expressing how you feel they have advanced.

5. Mention again other resources for information and counseling relating to sexuality.

6. Reinforce a feeling of graduation -- of parents and teenagers having learned and grown. Share your perceptions of each person's growth. Solicit "I-Messages" about the course as they experienced it.

Supplement 1

LIST OF DON'TS

DON'T: assume you understand

DON'T: bring up the past

DON'T: assume it will always be that way

DON'T: tell people what their problem is

DON'T: interrupt

DON'T: label

DON'T: say "should," "ought to," "must"

DON'T: blame

DON'T: say "always" and "never"

DON'T: say "you're wrong"

DON'T: say "either - or"

DON'T: say "if, then"

DON'T: try to make them feel guilty

DON'T: take on their problem

DON'T: change the subject

DON'T: point your finger

DON'T: use or encourage violence

DON'T: mock or ridicule someone

DON'T: say "I love you, but..."

DON'T: ask "Why?"

DON'T: use profane language

Supplement 2

STATEMENTS

Adolescents

1. I hate gym class.
2. I don't like wearing those baggy shorts.
3. The other girls always tease me.
4. I wish I looked more like Brooke Shields.
5. I never get chosen for the basketball games.
6. The other guys all have attractive girlfriends.
7. I'm pregnant. I don't know what to do.
8. These pimples will never go away.
9. I wish my breasts were larger.
10. I am in love.
11. I feel like such a dummy in algebra class.
12. Dad, I think I have VD.

Parents

1. I miss your father a lot.
2. I get so worried when your brother stays out too late.
3. That traffic was so bad; I thought I'd never get home.
4. I wish I had been as outgoing as you when I was a teenager.
5. My boss has really been on my back lately.
6. I think I want to go back to college.

Supplement 3

"I-MESSAGE" PRACTICE

Directions: Create an "I-Message" from the following situations:

Your son is watching TV and says, "Look at the tits on that chick!" You really want to say, "You should show more respect to women!"

Instead you say: (not necessarily at that time)

(Describe the behavior) "When _____
(State your feeling) I feel (felt)
(State how the behavior causes a problem for you) Because I think (thought) _____
(State what you want) I want _____."

Your daughter comes out of her room ready to go to a party wearing an outfit you feel would be more appropriate for a prostitute. You really want to say, "Get back in there and put some clothes on!"

Instead you say:

(Describe the behavior) "When _____
(State your feeling) I feel _____
(State how the behavior causes a problem for you) Because I think _____
(State what you want) I want _____."

Your mother has a habit of talking to you while you are on the telephone. You want to say, "Leave me alone!"

Instead you say:

(Describe the behavior) "When _____
(State your feeling) I feel _____
(State how the behavior causes a problem for you) Because _____
(State what you want) I want _____."

Your father tends to flirt with your girlfriend when she comes to visit you. You want to say, "Don't you think you're too old for that!"

Instead you say:

(Describe the behavior) "When _____
(State your feeling) I feel _____
(State how the behavior causes a problem for you) Because _____
(State what you want) I want _____."

Write your own situation and your own "I-Message."

(Describe the behavior) "When _____
(State your feeling) I feel _____
(State how the behavior causes a problem for you) Because _____
(State what you want) I want _____."

Supplement 4

COMMUNICATION
TOUCHING CONTINUUM

The line below represents a continuum of touching behavior that goes from no touch at all to touching whenever the two people are together. To answer each question place the number of the question at the point on the line that best describes what happens in your family.

None Always

For parents only:

1. How much physical touching occurred in your family as you were growing up?

2. How much touching occurs in your family now?

3. How much physical touching occurs between you and your partner?

For teenagers only:

4. How much physical touching occurs between you and your sisters/brothers?

5. How much physical touching occurs between you and your parents?

For both parents and teenagers:

6. With whom do you do more touching now?

_____ Spouse

_____ Daughter

_____ Son

_____ Parents

_____ Brother

_____ Sister

7. With whom would you like to do more touching?

_____ Spouse

_____ Daughter

_____ Son

_____ Parents

_____ Brother

_____ Sister

Supplement 5

PARENTS' GUIDELINES FOR FACILITATING COMMUNICATION

1. Children learn by observation, so how you express your attitudes nonverbally is important.

2. Try to be honest about sex in your home.

3. Become familiar with your children and their environment -- their jokes, the TV and news programs they see and their music. This will better enable you to teach your child about human sexuality. For example, you may be watching a TV program together. You could ask your child...

   - How do you feel about that?
   - What do you think s/he should do?
   - How do you think you would solve that problem?
   - Do you think that would happen the same in our family?
   - What differences do you see?

4. Try to avoid the "Big Talk" because it generally embarrasses the child. Answer questions as they come up.

5. When children ask a question, try to ascertain what they already know about the matter so that you can find out what their understanding is and any misconception they might have.

6. Answer questions one at a time.

7. Keep answers short, simple, clear, and in language the child understands.

8. Avoid comments that end conversations or put children on the defensive such as "Where did you hear that?" or "Don't be silly."

9. If you don't know the answer, admit it. Then find the answer. Have resource materials available.

10. If a child doesn't ask any questions about sex, be prepared to bring the subject up yourself. Use a news item about a sexual issue or the pregnancy of a friend to bring up the subject.

11. If you feel nervous and uncomfortable, gently share that with your child. However, do not burden the child with details of your sexual problems or anxieties.

12. If you feel very uncomfortable about sexual subjects and feel it would be harmful for you to handle the subject, make sure the child gets the information somewhere else -- from a relative, doctor, or books.

13. Sexual learning is a life-long process. A child may continue to ask the same questions; you will answer differently as s/he gets older.

14. The tone of your voice is important. Try to be light and casual when talking about sex with your child.

15. Listen when your children ask questions. Be attentive, look at them, stop other activity, etc.

16. Let your child lead the conversation.

17. If a child asks a question, don't worry about whether the child is too young to know the answer. If your child asks the question, s/he has probably been thinking about it and can handle the answer at some level. Therefore, try to answer at the child's level of understanding.

18. Emphasize the whole person and how sexuality and sexual behavior relate to their self-concept.

Supplement 6

TEENAGERS' GUIDELINES FOR FACILITATING COMMUNICATION

1. Pay attention to how you express your attitudes nonverbally at home.

2. Try to be honest about sex in your home.

3. Become familiar with your parents and their environment - for example, their jokes, the TV and news programs they see, and their music. This will better enable you to communicate your needs to your parents. For example, you may be watching a TV program together. You could say to your parent...

   - How do you feel about that?
   - What do you think s/he should do?
   - How do you think you would solve that problem?
   - Do you think that would happen the same in our family?
   - What differences do you see?

4. Try to avoid playing cool because it generally pushes parents away. Ask questions as they come up.

5. Ask questions one at a time.

6. Keep questions and comments simple, clear, and in language your parents understand.

7. Avoid comments that end conversations or put parents on the defensive such as "Where did you hear that?" or "Don't be old fashioned."

8. If a parent doesn't talk about sex, be prepared to bring the subject up yourself. Use a news item about a sexual issue, or the pregnancy of a friend to bring up the subject.

9. If you feel nervous and uncomfortable, your parents probably do too. Be respectful and patient.

10. If you feel very uncomfortable about sexual subjects and feel it would be too difficult to talk to your parent, you can get the information somewhere else -- from a relative, doctor, or books.

11. Sexual learning is a life-long process. Even though you have asked a question once, you may still want to ask the same question later. You remember different things as you get older.

12. Listen when your parent answers your questions. Be attentive, look at him/her, stop other activity, etc. If you feel uneasy, share that with your parents.

13. Take responsibility for the direction of the conversation. Then you will be sure to get to talk about what you want.

14. If you have a question, you're not too young to get an answer.

Supplement 7

QUESTIONS COMMONLY ASKED BY CHILDREN IN EARLY PUBERTY (9-12)

1. What are wet dreams?
2. Why do our bodies need to change?
3. What is masturbation? Is it harmful?
4. What's wrong with magazines with nude pictures?
5. Why do girls have periods?
6. Why is my penis smaller than yours? (son asks father)
7. Does it hurt to have sexual intercourse?
8. What does it mean to be queer (homosexual)?
9. What does "coming" mean?
10. Why do people have sexual intercourse?
11. Why don't boys have periods?
12. What are the first signs of pregnancy?
13. What is VD (venereal disease)?
14. How does it feel to make love?
15. How do you know when you're going to have your period?
16. How many minutes do you need to have intercourse?
17. What is love?
18. What happens when a woman has a baby at home?
19. Can someone love both sexes?
20. Does it hurt to have a baby?
21. When are you old enough to have sex?
22. Can you get pregnant when you're on your period?
23. What do you do if you get VD?
24. What is a virgin?

Supplement 8

QUESTIONS COMMONLY ASKED BY ADOLESCENTS

1. What's the best birth control method?
2. Is love a good reason to have sex?
3. Do the sex organs stop operating after a certain age?
4. At what age do you think it is best to have children?
5. Does it hurt when a guy and you go all the way?
6. How do you know if you are in love or if it is a crush?
7. How do you let someone know you don't like them anymore?
8. Why do guys always want sex?
9. Does intercourse hurt the first time?
10. Why might a girl's period be irregular?
11. Is oral sex perverted?
12. Why do some boys talk about girls that they have had sex with?
13. What is a good way to say no to a boy?
14. Do girls enjoy sex?
15. What is an orgasm?
16. Can you get pregnant without having intercourse?
17. How come girls don't ever pay for dates?
18. How do homosexuals have sex?

Supplement 9

SEXUAL VOCABULARY

Technical Words	Substitute	Preferred Word to Use With:		
		Partner	Children	Same-Sex Friend
1. abortion				
2. abstinence				
3. breasts				
4. clitoris				
5. conception				
6. condom				
7. diaphragm				
8. ejaculation				
9. embryo				
10. fetus				
11. genitals				
12. homosexual				
13. masturbation				
14. menstruation				
15. nocturnal emission				
16. orgasm				
17. penis				
18. scrotum				
19. semen				
20. sexual intercourse				
21. testicles				
22. urethra				
23. uterus				
24. vagina				

Supplement 10

GLOSSARY OF SEXUAL TERMS

Abortion - The premature expulsion of an embryo or fetus from the uterus before birth. If the body expels the embryo or fetus at an early stage, it is called a spontaneous abortion; if at a later stage, a miscarriage. If induced legally by a trained physician, it is called a therapeutic abortion.

Abstinence - To refrain from sexual intercourse.

Anus - Opening of the bowels in males and females; solid wastes pass through this opening to the outside of the body.

Bladder - An expandable muscular sac which stores urine in males and females.

Cervix - The muscle at the lower end of the uterus located at the back of the vagina; the cervix is the passageway into and out of the uterus.

Chancre - A painless sore that appears in early syphilis, usually on the sex organs.

Clitoris - A pea-size organ located above the urethra; the center of female sexual excitement whose nerve endings correspond to the head of the male's penis.

Conception - The penetration of an ovum (egg) by a sperm, resulting in the development of an embryo; impregnation, fertilization.

Condom - A rubber or membrane sheath placed over the erect penis before sexual intercourse to prevent semen from entering the vagina; used to prevent pregnancy and venereal disease.

Contraceptive (Birth control) - A device or method designed to prevent the fertilization of an ovum by a sperm during sexual intercourse.

Diaphragm - A rubber disc inserted into the vagina and over the cervix before intercourse to prevent sperm from passing through the cervix to the uterus.

Douche - A stream of water or other liquid solution directed into the vagina; intended to cleanse the vagina. NOT an effective contraceptive method.

Ejaculation - The discharge of semen from the penis; usually occurs during male orgasm.

Embryo - The developing organism after sperm and ovum are united and implanted in the uterine wall; in humans through the first 8 weeks of development.

Erection - An enlarged and stiffened penis; occurs when the veins in the penis fill with blood, usually from sexual excitement.

Fertilization - See Conception.

Fetus - The developing infant inside the female's uterus from the third month after conception until birth.

Genitals (Genitalia) - The external sex or reproductive organs of males (penis, testicles, and scrotum) and of females (vulva, clitoris, and vagina).

Gonorrhea - A sexually transmitted disease often characterized in men by a burning feeling during urination and discharge of pus from the urethra. Women usually have no noticeable symptoms.

Herpes Simplex Type II (Genital herpes) - A sexually transmitted disease for which there is no known cure; characterized by painful sores around the sex organs.

Heterosexual - Sexually attracted primarily to people of the opposite sex.

Homosexual - Sexually attracted primarily to people of the same sex.

I.U.D. (Intrauterine device) - A small birth control device inserted by a physician into the woman's uterus; prevents pregnancy.

Masturbation - Stimulating one's own sex organs to produce sexual excitement and often orgasm.

Menstruation - The monthly discharge of blood and tissue which has built up in the uterus in anticipation of a possible pregnancy. Lasts 3-6 days, approximately 28 days apart, during a woman's reproductive years.

Nocturnal Emission - (Wet dream) - Release of semen from a male's penis when he is asleep.

Orgasm - The pleasurable climax which releases the tension which builds during sexual excitement. In males, orgasm is usually simultaneous with ejaculation.

Ovum (Egg) - The female reproductive cell contained in the ovary. Normally, one is released each month (ovulation) into a Fallopian tube where it may be fertilized by a sperm.

Penis - External male organ containing cylindrical areas of spongy tissue which can become engorged with blood to increase its size. The glans, or head, is very sensitive and provides sexual pleasure. The penis contains the urethra through which urine and semen both pass, but never at the same time.

Rectum - The lower part of the large intestine, opening at the anus.

Rhythm Method - A method of birth control where intercourse is timed so that it does not occur on or around the days when the ovum might be available for fertilization, the so-called "safe days."

Scrotum - The sac of skin or pouch suspended below the base of the penis; contains the testicles.

Semen - The fluid released from the penis at the time of ejaculation; contains sperm and seminal fluid.

Sexual Intercourse (Coitus, having sex, making love) - The erect penis of the male entering the vagina of the female.

Sexually Transmitted Disease - A serious disease which is transmitted during close body contact, usually sexual intercourse.

Sperm (Spermatazoa) - The male reproductive cell produced in the testes and ejaculated in the semen. When it joins (fertilizes) the female's ovum, pregnancy results.

Syphilis - A sexually transmitted disease characterized by three stages. It can be treated and cured in the early stages.

Testicles (Testes) - Two walnut-shaped male organs located in the scrotum; produce the reproductive cells (sperm) and the male hormone, testosterone.

Urethra - The passage in both males and females through which urine travels from the bladder to the outside; in males, also carries semen (ejaculatory fluid).

Uterus (Womb) - A pear-shaped muscle in the female capable of expanding many times to accommodate the growth of a baby during pregnancy. When not pregnant, the uterine lining is shed monthly as the menstrual flow.

Vagina - Muscular passageway between the outside of the body and the uterus; sometimes called "birth canal."

Venereal disease (V.D.) - See Sexually Transmitted Disease.

From Saying Goodbye to: The Birds and The Bees and ... Telling the Real Story. Planned Parenthood of Santa Cruz County.

Supplement 11

FACTORS IN PROCEDURE SETTING

Problem:

What to talk about (i.e., define the problem).

Whose issue it is.

Procedure:

Who is included? (May we ask opinions of others at times?)

Where to talk.

When to talk.

Length of discussion. (May we set the timer for 15-30 minutes? May we break for 5 minutes?)

How to talk. (I messages and active listening.)

Stopping the discussion. (It is NOT fair to choose these because they stop the discussion without agreement: crying, screaming, throwing things, hitting, withdrawing.

Supplement 12

NEGOTIATION SKILLS

1. Define the problem in terms of each person's needs. State your needs using "I-Messages." Use reflective listening when the other person states his/hers.

2. Generate possible solutions. Brainstorm a list of solutions. Encourage each person to contribute.

3. Weigh advantages and disadvantages of each solution. Be honest in your considerations. Tune in to verbal and nonverbal clues about the other person's satisfaction with the solutions.

4. Decide on a mutually acceptable solution. Make sure you both understand the solution decided upon. Have the other person repeat it satisfactorily. If possible draw up a written contract.

5. Implement the solution: Decide who does what by when. Review the written or oral contract at regular intervals until the task is completed. Confront the other person with an "I-Message" if solution is forgotten in the following days.

6. If a solution has not been reached, tinker with the who, what, how, when, and where of the problem.

7. If a breakthrough has still not occurred, make another appointment, and don't discuss it until then.

Supplement 13

WHAT TEENAGERS WANT FROM PARENTS

The following are actual answers from a class of high school students.

WHAT WOULD YOU MOST WANT FROM YOUR PARENTS (BESIDES CLOTHES, CARS, ETC.)?

"Understanding, compromising, love and sharing. I want to be open with them and have them understand me and my values. I'd want them to understand and respect the freedom I want."

"I'd like my parents to treat me as my age. Not like a little kid! To understand me and be there when I need them to talk to. Not tell me what to do, rather advise me."

"Some understanding about the generation I'm in and I'd want them to stop being so closed-minded."

"More trust; better communication."

"Love, attention, open communication."

"I would want for them to respect and trust my opinions (which they usually do) and I don't want them to butt into the parts of my life that I don't want them in. I know I'm at a selfish stage where I will tell my parents what I want them to know and nothing more, but that's the way it is."

"To be more open with them; to be able to talk to them about anything. And for both of us to be more understanding."

"Trust, understanding, love."

"More communication."

"Love, understanding, more time together, trust, listening without yelling."

"I want my parents to trust me and to treat me as an adult, give me responsibilities that I know I can handle."

"I'd most want a relationship where I could tell them everything. A friendship where they could understand my feelings and I could understand their feelings. I wish they could talk to me more than they do and show that they really want me as a person; not only as a daughter. I wish they could understand my values if theirs are different than mine. I wish they could really relate to me and want to be my best friend."

"To be very understanding about how I feel and to let me show them how I would want to be treated."

"Understanding about doing things on my own and thinking my own way, to be treated as an individual."

"I would want my parents to give me respect as an adult and stop treating me as a little child who can't do anything right."

"The thing I would most want from my parents is their love, trust, understanding, and more patience."

"Recognition of what I do, understanding, and pride in what I do. I would most of all want a relationship with my parents where I can talk to them and we can be open and honest with each other about everything, including our feelings."

"Love - sharing experiences and doing things together as a family."

"Independence, understanding, a little more responsibility - a little trust."

IF YOU COULD ASK YOUR PARENTS ANY QUESTIONS ABOUT HUMAN SEXUALITY, WHAT WOULD YOU ASK?

"What experiences (love, hurt, etc.) did they have when they were our age in their love life?"

"How early would you accept your son or daughter having sex? In other words, what age do you think they should be, and would you be able to handle them telling you?"

"The sexuality of today's teens (dating, sex, ideas)."

"I already can ask about anything."

"I would ask about menstruation."

"I would ask them if they engaged in premarital sex."

"What are the problems in your sex life?"

"Do you enjoy making love together? How did you feel about sex at my age?"

"I'd ask them what they felt about premarital sex. I always wanted to know how they felt about it. I have a lot of older brothers and sisters and it seems that they would probably assume something about their relationship being sex-related. I'd like to know how they felt about it and maybe if they did it or not."

"How's my parents' sex life?"

"Are you sure that cabbage patch story is true? I wish my mother had the ability to discuss her problems with me. Because when I ask her what's wrong - she always says - 'You wouldn't understand.' I think I'd most like to ask my mother what's on her mind, and tell her I can understand."

Supplement 14

PROBLEM SITUATIONS

1. For the last 2 years your uncle (age 60) has lived with your family. In general, he has been a big help to the family by babysitting during the evening. Recently, 10-year-old Patty has been acting moody. When her parents tried to find out what was wrong, she told them that Uncle John had been feeling her breasts and "playing with her under her underwear."

2. Fifteen-year-old Sandy has a new boyfriend that she's "in love" with. Lately, her parents notice that she sleeps a lot and is gaining weight. When they confront her with their concerns, she blurts out that she's pregnant.

3. Sixteen-year-old Brian is handsome and very popular with the girls. Today he finds out that he has a sexually transmitted disease and he isn't sure where he got it.

4. Seventeen-year-old Jim is a very sensitive young man. Although he is quite popular at school, he has never dated a girl seriously. His father is worried that Jim is gay.

5. Nine-year-old Leslie is already quite developed. As a result, she gets teased a lot in school. Today the counselor telephoned her mother to say that Leslie was caught in the auditorium with a male schoolmate lying on top of her.

6. Tom, a 12-year-old, is on the basketball team at school. Therefore, he gets home somewhat late from school. On occasion, he hitchhikes even though his parents have warned him against it. This evening he came home very upset because the man who gave him a ride tried to make a pass at him.

7. Fourteen-year-old Jake has been dating Ann, a very nice girl in his neighborhood. Jake's parents like Ann and her family very much. Today Jake's mother came home unexpectedly from work and found them having sex on the living room sofa.

8. Fifteen-year-old Penny seems to be a "late bloomer" in comparison with her friends. Her breasts have not yet started to develop and she has not started menstruating yet. Today she came home in tears because the kids in her class were teasing her about her flat chest.

Appendix A

AUDIOVISUALS

Films

A Family Talks About Sex. Producer/Distributor: Perennial Education, Inc., 1978, 28 min., Color, $360.

Depicts open parent-child dialogue about sex-related topics in middle-class families. Presents brief dramatizations on issues such as masturbation, human reproduction, contraception, adolescent sexuality, obscenities, and privacy. It is particularly popular with parents. Because the film clearly endorses certain values, group facilitators often encourage parents to use the film to generate ideas on imparting their own family values. (One family is Black.)

Adrianne's Man. Producer: Viscount Productions. Distributor: Planned Parenthood of Memphis, 1979, 4 min., Color, $65 or $265 for 5 films.

This trigger film portrays a fifteen year old black teenager, Adrianne, involved with an "older man." Her older brother Sam is convinced that Adrianne is headed for trouble if she continues to see Jerry. It is very useful for stimulating a discussion of the advantages and disadvantages of teenagers dating persons considerably older than themselves and family reactions to this behavior.

Am I Normal? Producer/Distributor: New Day Films, 1979, 22 min., Color, $375.

In this humorous film, 13-year-old Jimmy tries to discover the "real story" behind the changes that his body is going through. Despite the pressure to "be cool" and "know all the answers," he finally finds some friendly adults who answer his questions about erections, wet dreams, masturbation, and other common concerns of boys. This film is very popular with both parents and children. (Ethnically-mixed cast.)

Boys Don't Do That. Producer: Planned Parenthood of Memphis and Viscount Productions. Distributor: Planned Parenthood Center of Memphis, 1979, 7 min., Color, $65 or $265 for 5 films.

While looking through a family picture album, a supposedly enlightened teenage boy and girl continue to reveal many examples of sex role stereotyping. This trigger film is a very good tool for stimulating discussion of this issue.

Coping II: Getting What You Want. Producer/Distributor: Film Fair Communication, 1979, 21 min., Color, $365.

Portrays four situations -- parent/child, dating, school, and work situations-- in which "getting what you want" requires gaining the other person's cooperation. Demonstrates effective communication and negotiation skills. Suggests practical ways to avoid and resolve conflicts. Carrying out the suggestions would not necessarily work as quickly or effectively as the film suggests. (Racially mixed.)

Dear Diary. Producer/Distributor: New Day Films, 1981, 24 min., Color, $375.

This humorous film focuses on the issues that concern many young adolescent girls. Three friends explore their feelings about boys, female roles, breast development, menstruation, and growing up. While the film successfully gives information through humor, a few of the scenes seem corny. Also, the mother in the film is portrayed as a totally inadequate resource for her daughter. (Racially mixed cast.)

Everybody Rides the Carousel, Part II. Producer/Distributor: Pyramid Films, 1976, 24 min., Color, $375.

This animated film portrays Erik Erickson's theory of the psychosocial development of the older child, adolescent, and young adult. The segment on adolescence contains a lot of symbolism that is sometimes missed by parents. If Erickson's theory has already been presented to a group of parents, this film can serve to reinforce basic concepts.

Happy To Be Me. Producer/Distributor: Arthur Mokin Productions, 1979, 25 min., Color, $425.

Based on a survey of more than 600 New York City public school children, this film provides an objective view of young people's attitudes toward male and female gender roles. Students of different ages and different races voice a variety of attitudes ranging from traditional to nonsexist. The range of attitudes that are expressed and the spontaneity of the interviews stimulates discussion among parents.

Human Growth III. Producer/Distributor: Perennial Education, Inc., 1976, 20 min., Color, $390.

Describes the changes in the human body from birth to physical maturity, adolescent feelings, and reproduction. Contains unusually good drawings of reproductive organs in the body, interesting questions asked by young teenagers, and a brief live birth scene. Sexuality educators consider this an excellent vehicle for providing factual information to parents. (Racially mixed.)

In Between. Producer: Viscount Productions. Distributor: Planned Parenthood of Memphis, 1981, 10 min., Color, $230.

Dramatizes the changing feelings and concerns of pre- and early adolescents. The key characters interact with family and friends in three situations which require them to make important decisions. The story takes place on a summer day in a small suburban ethnically mixed community. Geared to middle-class audiences.

It's My Decision As Long As It's What You Want. Producer/Distributor: McGraw-Hill, 1974, 14 min., Color, $235.

This film depicts in a realistic manner the communication difficulties that often occur between parent and adolescent. Jane and her mother cannot seem to understand each other. Mrs. Dalton doesn't think that Jane is mature enough to handle the freedom that she desires so badly. Portrays both mother and daughter as contributing to the problem. White middle class actors, but a wide range of parents and teenagers like this film.

It's Up To Laurie. Producer: Gordon-Kerckhoff Productions. Distributor: Centron Films, 1979, 21 min., Color, $395.

This film focuses on interpersonal relationships and attitudes toward dating and premarital sex. Depicts parent-child communication in three different family styles: authoritarian with little communication, permissive with little communication, and democratic with open lines of communication. In each family style the daughter, Laurie, has a different attitude about herself and her boyfriend, Jimmie. Although the acting is occasionally stilted, the film has been effective with both parents and teenagers from middle class backgrounds. Group leaders should stress that children reared in similar family styles will not necessarily behave as Laurie did. (White characters.) The film should be previewed.

Kevin. Producer/Distributor: Planned Parenthood of East Central Georgia, 1976, 3 min., Color, $50.

In this trigger film, Kevin's father awkwardly attempts to begin a conversation about sexuality. Kevin seems to perceive his father's discomfort and cuts the conversation short. Because it dramatizes some of the nonverbal and unintended messages parents may give their children, it is a good vehicle for exploring parent-child communication about sexuality. (White characters.)

Killing Us Softly. Producer: Jean Kilbourne. Distributor: Cambridge Documentary Films, 1979, 28 min., Color, $475.

This excellent film uses advertising clips as a way of illustrating the impact of the media on our perceptions of male and female roles. With an interesting mixture of insight, humor, and outrage, the commentator shows the audience that individual ads that seem harmless and "cute," add up to a powerful form of cultural conditioning. Although the film concentrates on the image of White women in the media, there are several segments on men and Black women in her presentation.

Loving Parents. Producer/Distributor: Texture Films, 1978, 24 min., Color, $395.

The film focuses on sex education in the home, with the understanding that parents are the best sex educators of their own children. The film addresses in a human and engaging way, the kinds of questions which many fathers and mothers raise: How should we project our sexuality to our children? What kind of guidance should we provide for their sexual development? How should we talk with them about sex? What kind of information about sexuality do they need? Particularly relevant for parents of adolescents. (Racially mixed cast.)

Mother May I? Producer/Distributor: Shared Futures Films, 1981, 26 min., Color, $425.

Presents the relationship between 11-year-old Karen and her older sister, Michelle. Karen finds out that Michelle might be pregnant and tries to convince her to tell their parents. By the end of the film Michelle finds out that she is not pregnant, but her parents realize that they have been embarrassed to talk about sex with each other and their children. While the acting is sometimes stilted, this film is a good vehicle for encouraging parents to discuss sex with their children. (White characters.)

Shelley, Pete ... and (Carol). Producer/Distributor: Modern Talking Picture Service, Inc., 1980, 22 min., Color, Free loan.

This film depicts the story of Pete and Shelley, two high school students who become teenage parents. The story line is interesting and realistic. However, the acting is poor. In spite of this flaw, the film is well received by junior and senior high school students.

Teenage Father. Producer/Distributor: Children's Home Society of California, 1978, 28 min., Color, $350.

This believable, powerful film is about the thoughts and feelings of a seventeen year old who has become a teenage father. The young couple are shown talking with their parents and debating their options with a social worker. The film also explores the adolescent sexual milieu. Only the credits at the film's end reveal that the cast members are professionals and that the story is a dramatization. It is one of the most highly regarded and widely used films in this country.

Then One Year. Producer/Distributor: Churchill Films, 1972, 18 min., Color, $295.

Covers the male and female reproductive systems and emphasizes the wide variation in normal growth and maturation rates. Presents factual information about puberty and reproduction in a manner that preteens can understand. Sex educators consider this an excellent film. (Ethnically mixed.)

Too Soon Blues. Producer/Distributor: Cine-Image Films, Ltd., 1973, 24 min., Color, $300.

This film explores teenage sexualitiy as a young inner-city black couple begin a relationship and have sex without contraception. It is a very realistic depiction of communication between a teenage boy and girl, each having different needs as well as their handling of a pregnancy scare. Numerous other teens give their perspectives on premarital sex, the double standard, communication, birth control, and other topics. It is a very good film in spite of the outdated music and clothing.

Wayne's Decision. Producer: Viscount Productions. Distributor: Planned Parenthood of Memphis, 1979, 4 min., Color, $65 or $265 for 5 films.

Seventeen-year-old Wayne tells his parents that his girlfriend, Donna, is pregnant. He wants to marry her but his distraught parents violently oppose his decision. Some people find this film overly dramatic, but consider it a good tool for stimulating discussions about decision making around an unplanned pregnancy and about father/son relationships. (White characters with strong Memphis accents.)

Woman-Child. Producer/Distributor: National Foundation/March of Dimes, 1977, 15 min., Color, $67.50.

The film opens with a voice-over of statistics on teenage pregnancy, abortion, and the prevalence of teenage mothers keeping their babies. Follows one pregnant high school girl through her pregnancy, delivery, and subsequent problems related to family, school, job, and child care. Can be used to raise parents' awareness of the problem of adolescent pregnancy. (Racially mixed.)

Filmstrips and Tapes

Adolescent Conflict: Parents vs. Teens. Producer/Distributor: Media Fair, Inc., 1977, 2 Filmstrips, 2 Cassettes, $69.

This two-part program assures students that conflict is a natural part of the process of maturation which originates in the search for independence during the adolescent years. Many find part one, which presents the causes and manifestations of parent/child conflicts, only somewhat useful, and show only part two, which uses the theories of transactional analysis to explain communication problems between parents and teenagers. Gives practical advice to teenagers who wish to negotiate more successfully with their parents.

Becoming An Adult: Psychological Tasks of Adolescence. Producer: Human Relations Media. Distributor: Media Fair, Inc., 1977, 3 Filmstrips, 3 Cassettes, $99.

Each section of this three-part program identifies a critical life task that is important to the transition from adolescence to adulthood. The first discusses the physical and emotional changes that occur during puberty: masturbation as an outlet, sexual experimentation, and mature and responsible sexual behavior. Part two focuses on the adolescents' need to establish themselves as individuals separate from parents and their accompanying ambivalence, moodiness, devotion to peers, rebelliousness, and distrust of adults. Part three identifies the quest for identity as the most important task of adolescence. In completing this task the adolescent develops a positive sense of self and values, realizes heightened intellectual capacities, and makes a commitment to work. Due to the technical language, this filmstrip is meant for highly educated parents, professionals, and bright high school students.

Teenage Pregnancy and Prevention. Producer: Human Relations Media. Distributor: Media Fair, 1978, 3 Filmstrips, 3 Cassettes, $99.

Sensitively examines the reasons behind the growing problem of teenage pregnancy -- the emotional, social, and financial difficulties facing pregnant teenagers and their partners. Part one uses current statistics to underscore the scope of the problem. Part two illustrates the difficult choices that teenagers must make and the resources available to them. Part three discusses preventive measures of abstinence and contraception. Many sex educators consider this an excellent resource.

Appendix B

RESOURCES FOR PROFESSIONALS

Print Resources

Aho, J., and Petras, J. Learning About Sex -- A Guide for Children and Their Parents. New York: Holt, Rinehart and Winston, Inc., 1978, $3.95.

Intended for parents to read with their children. Topics include puberty, masturbation, pregnancy, birth, venereal disease, birth control. The section designated "For Parents," presents a liberal attitude toward sex with an emphasis on feelings and love. A few of the graphics might be offensive to some parents.

Abbey Harris, N. and K.R. Todd. Saying Goodbye to: The Birds, the Bees, and ... Telling the Real Story: A Guide for Parents. Santa Cruz, CA: Planned Parenthood of Santa Cruz County, 1980, $12.

Attempts to help parents remember their own adolescence -- their feelings, desires, hopes and problems in relationships and in sexual decision making. Requires the reader to participate in various exercises and quizzes. Urges parents to sex educate and communicate with their children. Exposes today's parents to the current range of lifestyles and sexual styles. Includes a glossary and basic information on anatomy. Many sex educators recommend this workbook to highly motivated liberal parents as an excellent resource for do-it-yourself parent sex education.

Alter, J. and P. Wilson. Teaching Parents to be Primary Sexuality Educators of Their Children, Volume III: Curriculum Guide to Courses for Parents, 1982. Available from the National Technical Information Service, Springfield, VA.

A 12-hour course for parents that includes six units covering communication skills, values, sexuality through childhood, sexuality in the home, and understanding one's own sexuality.

Bem, S.L. Sex Role Adaptability: One Consequence of Psychological Androgyny. Journal of Personality and Social Psychology, 1974, 155-162.

This article addresses the impact upon individuals when they assume flexible gender roles.

Bem, S.L. Probing the Promise of Androgyny. In A.G. Kaplan and J.P. Bean (Eds), Beyond Sex-Role Stereotypes. Boston: Little, Brown and Company, 1976.

This chapter explores the issue of gender roles from a nonsexist, as well as academic, perspective.

Bernstein, A. The Flight of the Stork. New York: Dell Publishing Co., Inc., 1980, $2.50.

Identifies six different stages that children aged 3-12 go through in their awareness of procreation. Emphasizes that parents should be aware of the child's level of understanding when discussing the different aspects of pregnancy and birth and that what they say to their child is not necessarily what the child hears and understands.

Bignell, S. Sex Education: Teacher's Guide and Resource Manual. Santa Cruz, CA: Planned Parenthood of Santa Cruz County, 1977, 226 pp., $15.00.

A curriculum guide that provides background information and teaching techniques on reproductive and sexual anatomy and physiology, pregnancy and birth, homosexuality, pregnancy alternatives and venereal disease.

Carrera, M. Sex: The Facts, the Acts and Your Feelings. New York: Crown Publishers, Inc., 1981, $19.95.

This book is simply written, yet thorough and sensitive. Emphasizes the influence of religion and culture on sexual attitudes and behavior. Deals with issues related to age, myths, relationships and feelings. Attractive illustrations of young white men and women. Especially clear drawings of male and female genitalia.

Carney, C. and S.L. McMahon (Eds.). Exploring Contemporary Male/Female Roles: A Facilitator's Guide. La Jolla, CA: University Associates, Inc., 1977, 296 pp., $14.50.

A book of readings, structured experiences and questionnaires that encourage the examination of the male/female roles in U.S. society.

Communication Research Associates. Communicate! A Workbook for Professional Interpersonal Communication. Dubuque, IA: Kendall/Hunt Publishing Co., 1978, 253 pp., $13.50.

A manual for teachers containing strategies for facilitating effective communication skills. To obtain the book contact University Associates.

DeLora, J., & C. Warren. Understanding Sexual Interaction. Boston, MA: Houghton Mifflin Co., 1981, 642 pp., $16.95.

An extremely comprehensive and objective overview of human sexuality. The inclusion of anecdotal material adds to the readability of the text.

Dinkmeyer, D. and G.D. McKay. Systematic Training for Effective Parenting: Parent's Handbook. Circle Pines, MN: American Guidance Service, Inc., 1976, 117 pp.

Developed as a manual for parents who are participating in a STEP program (Systematic Training for Effective Parenting), this book suggests a framework based on the work of Rudolf Dreikurs for viewing children's behavior and misbehavior. Supports democratic principles in raising children, allowing them to learn from the consequences of their behavior; building the child's confidence through encouragement; using the communication skills of reflective listening and "I-Messages."

Ferster, C.B. and M.C. Perrott. Behavior Principles. NY: Meredith Corporation, 1968, 542 pp.

Textbook on behavior theory. Explains principles of positive, negative, and vicarious reinforcement, punishment, modeling and extinction.

Freud, S. The Sexual Enlightenment of Children. New York: Macmillan Publishing Co., Inc., 1963, $1.95.

Begins with general discussion of childhood sexuality, then presents and discusses the controversial case of "Hans' phobia." Freud points out the negative effects of denying children sexual information.

Gordon, S. Facts About Sex for Today's Youth. Fayetteville, NY: Ed-U-Press, 1979 (New Edition), $3.50.

An overview of sexuality for teenagers. Briefly discusses reproduction, love, premarital sex, male and female anatomy, sex differences and other topics. The drawings and graphics are factual and clear enough although birth control methods are not discussed in detail. Author expresses his belief that it is not a good idea for teenagers to have sex and risk pregnancy, venereal disease, and emotional harm.

Gordon, T. Parent Effectiveness Training. NY: David McKay Co., Inc., 1970, 334 pp., $11.95.

This how-to-parent manual describes a theory of raising children based on respect for their need to be free and separate individuals. Gordon explains and gives examples of how to listen, how to talk so children will listen, how to resolve conflicts in the relationship, and how to avoid "being fired" as a parent (alternatives to using power). P.E.T. is well-known for its communication skills: "I-Messages," reflective listening, determining who owns a problem, and the no-lose method of problem solving.

Hanson, S.B. and N. Nass. Sexuality Education for Parents: A Training Manual for Facilitators. Jefferson, WI: Planned Parenthood Association, 1979, $8.50.

This comprehensive guide provides a 4-session curriculum for a parent sex education program which covers basic knowledge, parent's feelings and communication skills. Provides information about all steps of organizing and implementing a program.

Johnson, D. and F. Johnson. Joining Together: Group Theory and Group Skills. Englewood Cliffs, NJ: Prentice-Hall, Inc., 1975, 480 pp., $11.95.

A textbook for teachers that provides the theory and experiences necessary to develop an understanding of group dynamics and effective group skills.

Johnson, E.W. Love and Sex in Plain Language. New York: Bantam Books, Inc., 1974, $1.95.

Discusses reproduction, heredity, fetal development, birth, sex differences, sexual intercourse, birth control, venereal disease, dating and love in language that is easily understood by most teenagers. Many sex educators recommend this book.

Katchadourian, H. and D. Lunde. Fundamentals of Human Sexuality. New York: Holt, Rinehart and Winston, 1980, 534 pp., $15.95.

A college level text that provides an overview of human sexuality for use by teachers. It includes a good section on the biological aspects of human sexuality.

Kelly, G.F. Learning About Sex - The Contemporary Guide for Young Adults. New York: Barron's Educational Series, Inc., 1976, $3.95., Grade Level: 9-12.

Discusses many important issues related to human sexuality including communicating about sex, marriage, and growing as a sexual person. Although the author indicates that his target audience is teenagers, the content seems extremely complex (the penis is described as "three cylindrical areas of spongy tissue") and often too abstract for the average teenager to read and comprehend easily. Intended for young adults but may be used with high school students with high reading levels. Includes exercises that can be carried out by the reader alone or in small groups in or out of the classroom. Many of these exercises, especially those related to communication and relationships, have been successfully carried out in education programs with adolescents.

Kohlberg, L. Stages in the Development of Moral Thought and Action. New York: Holt, Reinhart & Winston, 1969.

This book presents Kohlberg's original theories regarding the progressive stages of moral development in human beings.

Lewis, H.R. and M.E. Lewis. The Parent's Guide to Teenage Sex and Pregnancy. NY: St. Martin's Press, Inc., 1980, $15.95.

Describes what researchers are learning about adolescent sexual behavior. Discusses issues related to adolescent sexual activity, prevention of adolescent sexual problems, and ways to resolve problems that might occur.

Mattox, B. Getting It Together: Dilemmas for the Classroom. La Mesa, CA: Pennant Press, 1975, 174 pp., $5.55.

A guidebook that provides educators with simple activities that encourage students of all ages to improve their skills in moral decision making.

McCary, J.L. Human Sexuality. NY: Van Nostrand Rheinhold Co., third edition, 1978.

Morrison, Eleanor S. and M.U. Price. Values In Sexuality: A New Approach To Sex Education. New York: Hart Publishing Company, 1974, 219 pp., $5.95.

A manual of value clarification strategies for human sexuality education.

Piaget, J. The Child's Conception of the World. Totowa, NJ: Littlefield Adams and Co., 1975.

Ross, S. The Youth Values Project. Washington, DC: The Population Institute (c/o Susan Ross, RFD 3 Box 54, Putney, VT 05346), 1978, $1.50.

Teenagers themselves designed and conducted a questionnaire survey of one thousand 13-19 year olds to explore why sexually active teenagers in New York City do not use birth control.

Sargent, A.G. Beyond Sex Roles. St. Paul, MN: West Publishing, 1979, 507 pp., $13.50.

A book of readings and structured experiences that focus on sex role stereotyping.

Teenage Pregnancy: The Problem That Hasn't Gone Away. New York: Alan Guttmacher Institute, 1981, $5.00.

Presents demographic information about adolescent sexual activity, pregnancy, abortion and birth rates, and consequences of teenage childbearing. Describes sex education programs and other reproductive health services.

U.S. Department of Health, Education and Welfare. A Decision-Making Approach to Sex Education: A Curriculum Guide and Implementation Manual for a Model Program with Adolescents and Parents. Washington, DC: National Clearinghouse for Family Planning Information, P.O. Box 2225, Rockville, MD 20852, 1979, 296 pp., free.

A manual that includes guidelines for getting a program started (e.g., building community support), facts about adolescent sexuality, general tips for group leadership, detailed models for a ten-session adolescent sex education program and parent sex education program, and a model of staff training.

Zabin, L.S. and S.D. Clark. Why they Delay: A Study of Teenage Family Planning Clinic Patients. Family Planning Perspectives. Vol. 13:5, 1981, pp. 205-217.

Zelnick, M. and J.F. Kantner. Sexual Activity, Contraceptive Use and Pregnancy Among Metropolitan-Area Teenagers: 1971-1979. Family Planning Perspectives, Vol. 12, No. 5, September/October 1980, pp. 230-237.

A summary of the Johns Hopkins' research findings regarding the sexual and contraceptive behavior of adolescents in metropolitan areas around the United States.

Professional Training Resources

American Association of Sex Educators,
Counselors and Therapists
600 Maryland Avenue, SW
Washington, D.C. 20024
202-638-0103

American Institute of Sexology
Formerly Fleming Institute
103 Enterprise Street, #208
Raleigh, North Carolina 27607

Communication Center #1
214 S. Meramec Avenue
St. Louis, Missouri 63105
314-863-7267

ETR
1700 Mission
Suites 203-204
Santa Cruz, California 95060
408-429-9823

Family Planning Training Institute
Planned Parenthood of Maryland
610 N. Howard Avenue
Baltimore, Maryland 21201
301-752-0131

Human Sexuality Program
New York University
51 West 4th Street
New York, New York 10003

Institute for Family Research and Education
760 Ostrom Avenue
Syracuse, New York 13210
315-423-4584

International Council of Sex Education
and Parenthood
5010 Wisconsin Avenue, NW
Suite 304
Washington, D.C. 20016
202-686-2523

National Sex Forum
1523 Franklin Street
San Francisco, California 94139
415-938-1133

National Training Laboratories
1501 Wilson Boulevard
Arlington, Virginia 22209
703-527-1500

Planned Parenthood Federation
of America
810 Seventh Avenue
New York, New York 10019
212-541-7800

Regional Training Center
for Family Planning
100 Edgewood Avenue, NE
Suite 802
Atlanta, Georgia 30303
404-523-1996

Regional V Training Project
Indiana Family Health Council
21 Beachway Drive, Suite B
Indianapolis, Indiana 46224
317-247-9158

Sagamore Conference Center
11 Spring Street
Saratoga, New York 12866
518-587-8770

Sex Education Coalition
Friendship Station
P.O. Box 39133
Washington, D.C. 20016
202-547-2444

Sex Information and Education Council
of the United States (publishes a
list of training programs throughout
the U.S.)
84 Fifth Avenue
New York, New York 10011
212-929-2300

Training 3
2 Penn Center Plaza
Suite 616
Philadelphia, Pennsylvania 19102
215-563-7705

University Associates
8517 Production Avenue
P.O. Box 26240
San Diego, California 92126
800-854-2143

Appendix C

ORDERING INFORMATION

Audiovisual Distributors

Agency for Instructional Television
Box A
Bloomington, Indiana 47402
812-339-2203

Barr Films
P. O. Box 5667
3490 East Foothill Boulevard
Pasadena, California 91107
213-793-6153

Cambridge Documentary Films
P. O. Box 385
Cambridge, Massachusetts 02139

Centron Films
1621 West 9th, Box 687
Lawrence, Kansas 66044
913-843-0400

Churchill Films
662 N. Robertson Boulevard
Los Angeles, California 90060
213-657-5110

McGraw-Hill Films
110 Fifteenth Street
Del Mar, California 92014
714-453-5000

Media Fair, Inc.
380 Maple Avenue, West
Vienna, Virginia 22180
703-281-2223

Arthur Mokin Productions, Inc.
1600 West 60th Street
New York, New York 10023
212-757-4868

National Foundation/March of Dimes
1275 Mamaroneck Avenue
White Plains, New York 10605
914-428-7100

New Day Films
P. O. Box 315
Franklin Lakes, New Jersey 07417
201-891-8240

Perennial Education, Inc.
477 Roger Williams
P. O. Box 855, Ravinia
Highland Park, Illinois 60035
312-433-1610

Planned Parenthood Center
of Memphis
1407 Union Avenue
Memphis, Tennessee 38104

Planned Parenthood
of East Central Georgia
1247 15th Street
Augusta, Georgia 30901

Pyramid Films
P.O. Box 1048
Santa Monica, California 90406
213-828-7577

Shared Futures Films
P.O. Box 1235
New York, New York 10023

Texture Films, Inc.
1600 Broadway
New York, New York
212-586-6960

Third Eye World
12 Arrow Street
Cambridge, Massachusetts 02138

Publishers

Broadman Press
127 Ninth Avenue, N.
Nashville, Tennessee 37234
615-251-2544

Ed-U-Press
P.O. Box 583
Fayetteville, New York 13066
315-637-9524

Hart Publishing Co., Inc.
15 W. Fourth Street
New York, New York 10012
212-260-2430

Holt, Rinehart, and Winston
383 Madison Avenue
New York, New York 10017
212-688-9100

Houghton Mifflin Co.
2 Park Street
Boston, Massachusetts 02107

Kendall/Hunt Publishing Company
2460 Kerper Blvd
Dubuque, Iowa 52001
319-588-1451

Little, Brown and Company
34 Beacon Street
Boston, Massachusetts 02106

Mathtech
4630 Montgomery Avenue
Suite 300
Bethesda, Maryland 20814
301-657-1610

National Clearinghouse on
Family Planning Information
11301 Rockville Pike
Box 2225
Rockville, Maryland 20857
301-881-9400

Pennant Press
8265 Commercial Street, No. 14
La Mesa, California 92041
714-464-7811

Planned Parenthood of Santa Cruz Co.
212 Laurel Street
Santa Cruz, California 95060
408-425-1551

Prentice-Hall, Inc.
Box 500
Englewood Cliffs, New Jersey 07632
201-592-2000

University Associates
8517 Production Avenue
San Diego, California 92121
714-578-5900

Van Nostrand Reinhold Co.
LEPI Order Processing
7625 Empire Drive
Florence, Kentucky 41042

West Publishing.
W. Kellogg Blvd.
P.O. Box 3526
St. Paul, Minnesota 55165
612-228-2500

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